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UNIVERSITY

OF

LOUISIANA
L a f a y e t t e

Master of Science in Athletic Training Program

Policies & Procedures Manual

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Chapter 1: University of Louisiana at Lafayette Policies

1.1 Introduction

Welcome to the University of Louisiana at Lafayette Master of Science in Athletic Training Program (MSAT Program) Policies and Procedure Manual. The information contained within this manual was developed to assist and guide the athletic training student during their matriculation through the MSAT Program. The Student Handbook and Policies and Procedure Manual is also intended as a source, to students, instructors, and preceptors to help ensure continuity throughout the MSAT Program. All individuals involved with the University of Louisiana at Lafayette (UL Lafayette) MSAT Program are required to know and follow the policies and procedures as outlined in this manual. As with any written policy, the following guidelines are subject to administrative review and change but should act as a guideline for all MSAT Program students, faculty, and preceptors. It is imperative you realize not every situation can have a written policy in this manual and common sense with good judgment must prevail in situations that may and will be different from those outlined.

1.2 UL Lafayette's Mission Statement

The University of Louisiana at Lafayette offers an exceptional education informed by diverse worldviews grounded in tradition, heritage, and culture. We develop leaders and innovators who advance knowledge, cultivate aesthetic sensibility, and improve the human condition.

1.3 UL Lafayette's Values and Vision

We strive to create a community of leaders and innovators in an environment that fosters a desire to advance and disseminate knowledge.

We support the mission of the university by actualizing our core values:

- **Equity:** striving for fair treatment and justice
- **Integrity:** demonstrating character, honesty, and trustworthiness
- **Intellectual Curiosity:** pursuing knowledge and appreciating its inherent value
- **Creativity:** transcending established ideas
- **Tradition:** acknowledging the contributions of the Acadian and Creole cultures to this region and to our university's history
- **Transparency:** practicing open communication and sharing information
- **Respect:** demonstrating empathy and esteem for others
- **Collaboration:** understanding our connection with others and working to realize synergies through teamwork and collegiality
- **Pluralism:** believing in the inherent worth of diverse cultures and perspectives
- **Sustainability:** making decisions and allocating resources to meet the needs of the present, while preserving resources for the future.

We strive to be included in the top 25% of our peer institutions by 2020, improving our national and international status and recognition.

1.4 UL Lafayette's Student Code of Conduct

The university student code of conduct can be found at the following link:

<https://studentrights.louisiana.edu/student-conduct/code-conduct>. The student code of conduct includes sections on the university's mission and values, jurisdiction, student conduct, student conduct authority, formal conduct overview and procedures. Topics include, but are not limited to, physical abuse, theft, bribery, breaching safety, academic cheating and plagiarism, drugs and alcohol, larceny, forgery, gambling, obscene

conduct, illicit sexual relations, disorderly conduct, hazing, sexual harassment, sexual abuse, privacy, and scholarship.

1.5 UL Lafayette's Non-discrimination Policy

The MSAT Program follows the same non-discrimination Policy as UL Lafayette. That statement is as follows:

The University of Louisiana at Lafayette does not discriminate on the basis of race, color, national origin, age, religion, sex, sexual orientation, or disability in admission to, access to, treatment in, or employment in its programs and activities as required by Title VI and Title VII of the Civil Rights Act of 1964, Age Discrimination in Employment Act of 1967, Age Discrimination Act of 1975, the Equal Pay Act of 1963, Title IX of the Education Amendments of 1972, Executive Order 11246, Section 503 and 504 of the Rehabilitation Act of 1973, Section 402 of the Vietnam Era Veterans, Readjustment Assistance Act of 1974 and the 1990 Americans with Disabilities Act. Contact the following regarding nondiscrimination policies:

Chief Human Resource Officer
University of Louisiana at Lafayette
Buchanan Hall, Rm 300
Phone: (337) 482-2921

Inquiries concerning the application of nondiscrimination policies may also be referred to:

Regional Civil Rights Director
Office for Civil Rights, Dallas Office
U. S. Department of Education
1999 Bryan Street, Suite 2600
Dallas, Texas, 75201
Phone: (214) 880-2459
Fax: (214) 880-3082
TDD: (214) 880-2456
Email: OCR.Dallas@ed.gov

The University of Louisiana at Lafayette has complied with the Family Rights and Privacy Act of 1974. See Institutional Policy in Rules and Regulations Section.

1.6 UL Lafayette's Attendance Policy

Class attendance is regarded as an obligation as well as a privilege, and all students are expected to attend all class sessions regularly and punctually. Furthermore, if a student is absent for any reason, he or she is responsible for all missed assignments and material.

Classes with 3 Class meetings Per Week (MWF): More than 3 unexcused absences in this course will be considered excessive. Beginning with the 4th unexcused absence, the student's final grade will be reduced by 1 letter grade for each unexcused absence. For example, if a student has a 93% but 5 total unexcused absences, the final letter grade assigned would be a 73% =C.

Classes with 2 Class Meetings Per Week (TR): More than 2 unexcused absences in the course will be considered excessive. Beginning with the 3rd unexcused absence, the student's final grade will be reduced by 1 letter grade for each unexcused absence.

Classes with 1 Class Meeting Per Week: The student will be allowed 1 unexcused absence. Beginning with the 2nd unexcused absence, the student's final grade will be reduced by 1 letter grade for each unexcused absence.

For an absence to be considered excused, it must fall within one of the following categories:

- 1) Death in the immediate family
- 2) Illness by the student requiring bed rest and documentation by a physician.
- 3) University sponsored activity
- 4) Religious Holiday

Appropriate documentation is required for each excused absence. In accordance with the 2013- 2015 undergraduate bulletin, if a student knows of an absence in advance, documentation should be provided to the instructor before the absence occurs. Extended absences due to illness or other circumstances beyond the student's control should be reported by the student to the Dean of Students. The Dean of Student's will notify the instructor(s) of the circumstances surrounding the absence.

1.7 Counseling and Testing Support

The UL Lafayette MSAT Program recognizes the diversity of students and their learning styles. In the event a student has trouble with course material or progressions, the university and program recommend the following course of action:

1. Initiate a meeting with the instructor or preceptor as soon as a problem arises. In most situations, the instructor or preceptor may be able to further explain the material in a manner that the student understands or be able to recommend other forms of remediation or counseling.
2. Initiate a meeting with the Program Director or additional faculty or preceptor who may be able to further explain the material in a manner that the student understands or be able to recommend other forms of remediation or counseling.

The UL Lafayette Counseling and Testing Services, a branch of Student Affairs, is available to all students. Counseling and Testing provides both academic and personal support to students and faculty. Some of the services provided by the UL Lafayette Counseling and Testing Services are:

- Personal counseling (crisis intervention, short-term counseling for individuals, couples, or groups)
- Study skills, time management, stress management
- Anxiety
- Alcohol and substance abuse
- Assertiveness
- Depression
- Sexual Orientation

The University's Counseling and Testing Center provides personal counseling, crisis intervention, and short-term psychotherapy for individuals, couples, families, and groups. The center offers an unlimited number of free sessions to university students and faculty and staff members. The center's hours are from 7:30 a.m. until 5 p.m. Monday through Thursday and from 7:30 a.m. until 12:30 p.m. on Friday. The Counseling Center is located within the Saucier Wellness Center in OK Allen Hall. To schedule an appointment, call (337) 482-6480 or stop by the center.

The Counseling Center also has a counselor on call 24 hours a day, 365 days a year for mental health emergencies. Call (337) 482-6447 for the counselor on call.

As of Fall 2024, the UL Counseling and Testing Center has partnered with Uwill, an online mental health and wellness solution for students, to provide immediate mental health support nationwide. Uwill offers students free and immediate access to teletherapy, mental health crisis support, medication management, and wellness programming through its user-friendly online platform. The service is private, secure, and confidential.

Teletherapy

Schedule an immediate appointment with a student-focused, licensed counselor. To schedule a teletherapy session:

- [Create a profile](#) with Uwill.
- Choose a licensed counselor based on your preferences including availability, issue, gender, language, ethnicity, and therapist specialty.
- Choose a time that fits your schedule with day, night, and weekend availability.

Mental Health Crisis Support

If you experience a mental health crisis, call (833) 646-1526 and speak with a mental health professional. Help is available 24 hours a day, 365 days a year.

Medication Management

Uwill can connect you with a medical professional for an evaluation and medication management.

Wellness Programming

Uwill can help you achieve greater focus and balance as you navigate the semester. Students also have free access to on-demand wellness programming through Uwill's platform. From the left navigation, select Wellness, to find a range of topics such as yoga, meditation, and mindfulness.

Questions

If you need assistance, refer to the Uwill FAQ or Student User Guide or email support@uwill.com.

1.8 Student Withdraws and Tuition/Fee Reimbursement.

In the event a student has come to the decision to withdraw from UL Lafayette, there are specific guidelines the Office of the Registrar has in place and can be found at <https://registrar.louisiana.edu/registration/adjust-my-schedule/resignation-university>.

Withdrawing from a course means that you are dropping one specific course from your schedule. Resigning from the University means that you are withdrawing from all courses in a specific semester. The process for both (withdrawing from a course and resigning from the University) is the same; however, different deadlines apply.

The deadline to withdraw from a class with a grade of "W" and the deadline to resign from the University are published in the Academic Calendar which can be found at <https://registrar.louisiana.edu/node/26>. The deadline for voluntary resignation from the University is approximately 70% into the semester/session/intersession.

Graduate Students:

If you are graduate student, please initiate your request with gradschool@louisiana.edu

- If you are requesting a military withdrawal, you must send a copy of your military orders with your request.
- If you are an online graduate student, please initiate your request with gradschool@louisiana.edu
- If you are a graduate student, you can find out more information regarding the Graduate School's policy on Leave of Absence.

If you are attempting to withdraw from a class or resign from the University after the deadline, you must appeal to the academic dean of your college and present proof of extenuating circumstances before your request can be considered.

If you resign or cancel your registration on or before the fourteenth (14th) day of class, in a regular semester (spring or fall), or by the seventh (7th) day of a summer session, you are required to reapply for admission for future enrollment.

If you resign after the Schedule Adjustment (Drop/Add) Period, you will be assigned grades of "W" for all courses in the semester which you resigned.

Students are permitted a specific number of grades of W without financial penalty. Withdrawals resulting from a resignation from the University will not count toward the limit. Please review the Course Drop Policy for details.

When a student officially resigns from the university, credit adjustments will be based on the official date of resignation. A resignation credit adjustment, if applicable, is based on current hours enrolled. Whether or not a student attends class does not factor into the credit adjustment calculation. There is no adjustment to tuition and fees charged when a student reduces his/her course load by dropping one or more classes once registration closes.

Regular Fall/Spring Semester:

- Prior to the first-class day = 100% credit adjustment
- 1st class day through 5th class day (Drop & Add Period) = 100% credit adjustment
- 6th class day through the 14th class day (census day) = 50% credit adjustment

Regular Summer Semester and Fall & Spring A and B Terms:

- Prior to the first-class day = 100% credit adjustment
- 1st class day through the 3rd class day (Drop & Add Period) = 100% credit adjustment
- 4th class day through 7th class day (census day) = 50% credit adjustment

If a student has to resign for the semester due to extenuating circumstances, they are encouraged to review the Tuition and Fee Appeal Policy to see if they are eligible to appeal the remaining Tuition and Fees for the term.

NOTE: The student insurance fee, late resignation fee, freshman orientation fee, re-instatement fee, international service fee, technology fees, and certain course/section fees are not refundable.

*** Please consult with the Office of Student Financial Aid as changes to your schedule may impact your financial aid status.

1.9 UL Lafayette's Graduate School Mission Statement

The Graduate School offers the administrative structure, leadership, and guidance necessary to support graduate education at the University. The staff of the Graduate School works with the Graduate Council, the academic deans, and the graduate departments and faculty to help provide students a superior educational environment within which to pursue graduate and professional degrees.

Graduate faculty members design and maintain intellectually rigorous programs that lead students to extend their knowledge, expand their capabilities, and develop critical thinking skills and expertise necessary to conduct original research. Graduate students work closely with faculty members who are committed to advancing the state of knowledge in their disciplines. Students and faculty are thus reciprocally engaged in

intense learning, teaching, and research activities; the Graduate School supports and serves those so engaged.

1.10 UL Lafayette's Graduate School Admission to Candidacy

Admission to candidacy for a master's degree is recognition of a stage in advancement toward the degree.

Prior to the student applying for admission to candidacy, the student's advisory committee must be named according to the procedure established by the department or program concerned. In all cases, the committee must be chaired by a member of the UL Lafayette Graduate Faculty. The committee is generally comprised of three or four members.

After having completed 12 semester hours of graduate degree credit with a grade-point average of 3.0 or better, a student classified in regular admission status shall submit, on a form provided by the Graduate School office, a written application for admission to candidacy for the master's degree. Prior to submission of the application, a plan of study must have been approved by the student's advisory committee, each member of which must sign the application for candidacy form before it is transmitted to the Graduate School.

The written application for admission to candidacy should be submitted no later than 10 class days after the first day of classes in the next semester in which the student is enrolled after having become eligible to apply for admission to candidacy. The applicant should, if possible, indicate on the application form a tentative thesis title if in a program that requires a thesis. Students who do not submit applications will be blocked from future registration.

Each application for admission to candidacy for a master's degree must be approved by the Graduate Dean. No person whose proficiency in English is unsatisfactory will be admitted to candidacy.

1.11 UL Lafayette's Graduate School Applying for Candidacy

Students will declare their intentions to complete the thesis or non-thesis track after completing 12 hours of coursework. Foregoing the submission of this form may result in a hold being placed on a student's account, causing them to be unable to register for classes (and potentially incurring fees for activities such as late registration).

When applying for candidacy, students will be asked to identify their master's committee. At least three committee members are required for a master's committee (i.e., one committee chair and two other members). At least three of the committee members must hold graduate faculty status. A list of current graduate faculty can be found here: <https://gradschool.louisiana.edu/faculty/graduate-faculty/current-graduate-faculty>. Committee members can come from any department (though non-thesis students are encouraged to only select Kinesiology faculty for logistical purposes).

The candidacy form can be found in the Forms section of the Graduate School website (i.e., <https://louisiana.edu/graduateschool/tools-success/graduate-school-forms>). Prior to electing to complete the thesis or non-thesis track, students must discuss their plans for a thesis or internship capstone project with a potential committee chair. It is recommended that the discussion also occur with the other committee members selected by the student.

In addition to the Graduate School's candidacy policy, the MSAT Program requires that all students who are enrolled in the program submit their research for publication or presentation. This addition will allow students to contribute research for others in their community and/or profession to learn from and allow them to see how to become lifelong learners.

1.12 UL Lafayette's Graduate School Forms

The following forms are available at <https://louisiana.edu/graduateschool/tools-success/graduate-school-forms>. Please go to the Grad School's webpage to access the most recent version of the forms listed below.

Prospective Students

- Apply for Graduate Admission
Please submit your application for admission via the online application. If you are unable to access the online version, you may request a paper application by emailing your request and reason for request to gradschool@louisiana.edu.
- Apply for Graduate Assistantship
- Apply for Doctoral Fellowship
- Apply for BOR/SREB Minority Doctoral Fellowship (Fall 2012)
- Apply for Master's Fellowship
- Apply for Alumni Association Scholarship
- Financial Information Form
(for International Students only)
- Immunization Form
(**Updated form** - Effective immediately, all applicants must submit an original copy of both page 1 and page 2 of the immunization form.)
- Letters of Reference (3)
- Recommendation Form (ONLY for DNP (Doctor of Nursing Practice) applicants)
- Request to Update Application/Admission form
Complete this form to request an update in your semester of application or in your semester of admission.

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Current Students

- Appeal for Extension of "I" Grade
- Apply for Graduate Assistantship
- Apply for Alumni Association Scholarship
- Apply for Doctoral Candidacy
- Apply for Master's Candidacy
- Application for Degree
(Must be accompanied by the Graduation Checklist form.)
- Application for Graduate Certificate
- Graduation Checklist
(Must be accompanied by Application for Degree form.)
- Guidelines for Graduate Assistants and Fellows
- IRB Information for UL Lafayette Graduate Students
- Key Request Form
- Petition for Regular Status
(for Conditionally Admitted Students only)
- Separation Clearance Form
(for Withdrawing and Graduating Students)
- Transfer Graduate Credit

Thesis and Dissertation Writers

- Guidelines for Graduate Theses and Dissertations
- Checklist for Thesis & Dissertation Writers
(Handout from Formatting & Editing Your Thesis or Dissertation Workshop)
- Copyright Compliance Form
- Preliminary Approval of Draft of Thesis or Dissertation

1.13 Graduate School Appeals Process

The Appeals Committee considers appeals from (1) applicants who have been denied admission to Graduate School, (2) graduate students who have become ineligible to continue (or re-enter) as a result of earning C, D, or F, falling below a 3.0 overall GPA, or failing to meet other requirements in their course of study, (3) current graduate students who wish to transfer credit from a non-U.S. institution, (4) graduate students requesting additional attempts to satisfy all or part of the comprehensive examination requirement, and (5) departments or other campus units that wish to offer an assistantship to a graduate student who has been admitted conditionally. The Appeals Committee also considers requests for (6) academic amnesty.

The Appeals Committee meets only once per semester—Spring, Summer, and Fall—on the Friday prior to the start of classes. To ensure consideration, all appeal materials must be received by the Graduate School well in advance of this meeting. Students/prospective students are encouraged to contact the Graduate School for deadlines to submit appeal materials. Appeals submitted after the committee has met may not be heard until the following semester.

Graduate-Student-Initiated Appeals

1. For graduate students/prospective students who are denied admission or declared ineligible to re-enter/continue, an appeal to this committee is the only way to gain entry or reentry into the Graduate School. According to the Graduate Catalog, an appeal must be made in accordance with the following procedures:

- the graduate student/prospective graduate student must present a letter of petition to the Graduate School outlining the reasons for appealing.
 - this letter of petition should be addressed to the Committee on Graduate Student Appeals

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- this letter of petition should be sent directly to the Graduate School (send via email to gradschool@louisiana.edu or megan.trahan@louisiana.edu)
- The graduate student/prospective graduate student may also include letters of recommendation and/or additional documentation in support of the appeal.
- A copy of the letter of petition will be provided by the Graduate School to the graduate coordinator for the program where the student/prospective student was or wishes to be.
 - the graduate coordinator shall return a letter of response to the Graduate School that includes the decision of the program-level committee charged with responding to appeals.
 - The departmental letter of response must include a justification and may recommend support for the appeal, support with conditions, or denial of support.
 - The appeal will not be heard until this departmental letter of response is received.
 - If appealing as a non-degree-seeking entree or master's +30 graduate student, a departmental letter of response shall not be required.

Receipt of the letter of petition shall serve as official notification to the Graduate School that an admission/reinstatement appeal has been initiated.

2. Similarly, a graduate student who wishes to transfer credits earned at a non-U.S. institution:

- must complete the “Application for Use of Transfer Graduate Credits” form and submit it to the Graduate School
- must provide official transcripts from the non-U.S. institution(s) that awarded the credits.

Receipt of the completed graduate credit transfer form (with approval of the graduate coordinator) and official transcripts shall serve as official notification to the Graduate School that an international transfer credit appeal has been initiated.

3. And, finally, a graduate student/prospective student seeking academic amnesty must provide:

- a letter of application
- that sets forth the reason and justification for the amnesty request (send via email to megan.trahan@louisiana.edu)
- a letter of support, with any conditions deemed necessary, from the graduate coordinator for the program to which the applicant is seeking admission (and endorsed by the Department Head and Dean of the College)
- all other materials required for graduate admission.

Please take care to review the Amnesty Policy online at <http://gradschool.louisiana.edu/node/36> (and in the University Catalog at <https://catalog.louisiana.edu/content.php?catoid=12&navoid=3140>) for the guidelines governing academic amnesty.

Receipt of the letter of application shall serve as official notification to the Graduate School that an amnesty appeal has been initiated.

Grade Appeals

When a graduate student who feels that he/she has received an unfair and/or capricious final grade in a course initiates a grade appeal, the Graduate School is not immediately involved. Rather, the Grade Appeals Committee hears these appeals and the University’s “Guidelines for Appealing Unfair and/or Capricious Final Grades” governs this appeal process.

Violation of the Student Code of Conduct Appeals

When a graduate student is accused of or has been disciplined for violating any rule or regulation of the Board of Supervisors, the University, or its various divisions, the Graduate School is not directly involved (though notification is sent to the Graduate School). Rather, this process is handled by the Dean of Students and the Student Discipline Committee. Graduate students have the right to appeal any sanction or probation or suspension, dismissal, or expulsion. Information on this process can be found in the University’s “Code of Student Conduct and Appeal Procedures.”

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Tuition and Fee Appeals

When a graduate student initiates a tuition and fee appeal to request that the tuition/fee charges for a particular semester be removed from his/her account, again the Graduate School is not directly involved. Rather, the Registrar's Office manages this process, and the appeal is considered by the University's Fee Committee. These kinds of appeals may be filed for situations beyond the student's control (e.g., medical emergencies, military obligations, transferring to another institution, or personal hardships). The policy and procedures governing this appeal process can be found online on the Office of the Registrar's website at <http://registrar.louisiana.edu/content/services/tuition-fee-appeals-procedure>.

1.14 UL Lafayette's College of Education and Human Development Mission Statement

The mission of the College of Education at UL Lafayette is built on the three pillars of the academy: Teaching, Scholarship, and Service. A commitment to high standards in each of these areas enables the college to be responsive to community, regional, and state needs while addressing national and international concerns. Through teaching, scholarship, and service, the college strives to prepare outstanding teachers, educational leaders, and other professionals in related domains, while developing viable public and private partnerships which systematically improve education. This mission, being fundamental and timeless, represents the professional and ethical imperative of the College of Education to be attentive to the needs of contemporary college students and to the challenges of serving a diverse, modern society.

1.15 UL Lafayette's School of Kinesiology Mission Statement

The mission of the School of Kinesiology is to develop highly skilled graduate and undergraduate students who will be competitive in the job market based around core experiences that consists of innovative instruction, exposure to cutting edge scholarship, and community engagement.

Kinesiology is a program in motion. We study human movement from a wide range of perspectives, in disciplines such as physical education, medicine/rehabilitation, sports performance, fitness, research, and other allied health areas. We combine traditional classroom activities with experiential learning to ensure our students gain the knowledge, skills, and values they need to become professionals in health and wellness.

Chapter 2: Master of Science in Athletic Training Academic Program

2.1 MSAT Program Mission and Vision Statement

The mission of the athletic training master's degree program at UL Lafayette is to prepare students for professional assimilation through a rigorous education process that blends a challenging academic curriculum with aggressive, hands-on clinical experiences. Through this process, our students will become life-long learners who seek answers to the changing medical environment by exploring and conducting research. Ultimately, graduates of the athletic training program at UL Lafayette will be prepared to pass the Board of Certification (BOC) exam and become competent Allied Healthcare professionals for physically active individuals.

Core Principles

The UL Lafayette MSAT Program believes that:

- Athletic trainers are integral healthcare providers who learn and work with other allied healthcare clinicians.
- Athletic training students will become lifelong learners through incorporating evidence-based practice for quality patient care.
- Athletic trainers should practice patient centered care using NATA's shared professional values: caring and compassionate care, promoting integrity, respecting all persons regardless of differences, being mindful and providing competent care, and holding themselves and others accountable.
- All individuals associated with the program incorporate reflective practice into their skillset to modify future experience to better meet the needs of others.

2.2 MSAT Program Goals and Expected Outcomes

Overall Program Goals: Through didactic and clinical experiences, students will master the knowledge and clinical competencies related to the core content areas on the path to a successful career as a Certified Athletic Trainer. In addition to the core content, program goals and objectives aim to:

- Develop decision making and critical thinking skills in students by immersing them in hands-on clinical experiences.
- Have students learn effective communication and active listening skills by interacting with a diverse patient population.
- Achieve a 70% first-time pass rate and 90% overall pass rate on the BOC exam.
- Promote professional socialization of students in the athletic training field by encouraging at least two healthcare mentors prior to graduation.
- Promote significant contributions to the profession through research and service requiring all students to submit for presentation or publication prior to graduation.
- Achieve 70% student placement in a professional setting prior to graduation.

2.3 CAATE Overview

The purpose of the Commission on Accreditation of Athletic Training Education (CAATE) is to develop, maintain, and promote appropriate minimum education standards for quality for professional (entry-level) athletic training programs. CAATE is sponsored by the American Academy of Family Physicians, the American Academy of Pediatrics, the American Orthopedic Society for Sports Medicine, and the National Athletic Trainers' Association (NATA).

2.4 MSAT Program Accreditation Status

UL's athletic training program has been designed following Commission on Accreditation of Athletic Training Education (CAATE) accreditation standards. UL's MSAT Program is fully accredited by the **Commission on Accreditation of Athletic Training Education Programs (CAATE)**, 6850 Austin Center Blvd Suite 100, Austin, Texas, 78731-3184 (phone #512-733-9700). Our most recent comprehensive re-accreditation review was in 2022-2023 and was awarded a 3-year accreditation period with our next comprehensive review in 2027-2028.

2.5 Faculty and Medical Director

Core Faculty		
Aimee Gros, EdD, LAT, ATC Program Director Bourgeois Hall 125-A Aimee.gros@louisiana.edu	Sarah Myers, PhD, LATC, ATC Clinical Education Coordinator Bourgeois Hall 132-A sarah.myers@louisiana.edu	Shiho Goto, PhD, ATC Assistant Professor Bourgeois Hall shiho.goto@louisiana.edu
Additional Faculty		
Shuichi Sato Director, School of Kinesiology Bourgeois Hall 129-B Shuichi.sato@louisiana.edu	Rachel Ellison, PhD Associate Professor, HSA VL Wharton Hall – Remote Faculty Rachel.ellison@louisiana.edu	
Medical Director		
Stephanie Aldret, DO Discipline Chair for Family Medicine VCOM Edward via College of Osteopathic Medicine snaldret@gmail.com		

2.6 Student Admission Requirements and Application Process

To be considered for admission to the Graduate School at UL Lafayette, applicants must:

- Meet the general application and admission requirements for the Graduate School at UL Lafayette.
 - The application must include three letters of recommendation written by individuals who are familiar with the candidate’s ability to be successful as a graduate student in an MSAT program as well as a positive representation of UL.
 - At least one of the three letters of recommendation required by the Graduate School must be from a certified athletic trainer (ATC) who has supervised the applicant’s observation hours and at least one of the letters must be from an academic reference that can speak to the applicant’s ability to be successful in graduate level coursework.
- Hold a bachelor’s degree in kinesiology or allied health-related field.
- Demonstrate completion of pre-requisite postsecondary coursework (with a C or better in each course) in biology, chemistry, physics, anatomy and physiology, medical terminology, nutrition, exercise physiology, statistics, psychology or sports psychology, and biomechanics or structural kinesiology. Learn more about the [pre-requisite requirements](#). (Appendix A)
NOTE: Substitutions for this coursework may be considered by the program on a case-by-case basis after the application is submitted. Approval of substitutions is at the discretion of the Program Director.
- Have a cumulative 2.75 overall GPA or a 3.00 cumulative GPA in the last 60 credit hours including all transfer credit hours.
- There is no GRE requirement for the MSAT Program.

In addition, to formally apply to the MSAT Program, students must turn in secondary application information. A list of these forms and sample documents can be found at <https://kinesiology.louisiana.edu/prospective-students/masters-program/athletic-training>. They must be submitted into the student’s Graduate School portal:

- Submit evidence of current First Aid and BLS CPR certification.
- Submit evidence of completion of 75 hours of observation under a certified Athletic Trainer (ATC).
 - If observation hours are completed with multiple ATs, the candidate will be required to upload one file that includes separate forms from each healthcare provider.
- Submit a current resume and statement of purpose. The statement of purpose must include prompts that can be found on the MSAT Program’s website.

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The Athletic Training Education Committee will review applicants once a month following the opening of the application portal. Students will begin receiving reminders about missing application pieces once the committee begins to review applicants. The MSAT Program accepts students into the program on a rolling admissions basis, as space within the program allows. The application deadline is **April 1 of each year**.

Throughout the application process, you may be asked to verify your immunization history with documentation, including the COVID-19 vaccination as well as complete a health history questionnaire.

Applicants may be invited for an interview (virtual or in person) for candidates to further demonstrate their acceptability for candidacy. These interviews will be scheduled based on committee and candidate availability throughout the application cycle until seats for the program have filled.

2.7 Reapplication Process

Should a student not be accepted into the MSAT Program after their initial application, they may re-apply to the following academic cohort which begins every summer. Academically, students may choose to re-take pre-requisite courses to improve their GPA. Clinically, students may continue to acquire observation hours under an AT in a multitude of settings. The re-application documents must include an updated resume and statement of purpose specifically outlining the student’s progress since initial application.

2.8 MSAT Students’ Health Records

MSAT student health records will be secured and filed in the office of the AT Program Director. The student can request to view their file at any time. The student is obligated to report any change in their health and wellbeing which could prohibit the AT student from meeting the AT Program Technical Standards, see Policy and Procedure Manual, section IV(a).

2.9 Tuition and Fees

University of Louisiana at Lafayette MSAT Program Tuition Fees		
**based on 2024-2025 UL Lafayette tuition and fees (minus MSAT Program lab fees)		
**current graduate student tuition and fees can be found at https://louisiana.edu/studentcashier/tuition-fees/current-tuition-fees/current-graduate-tuition-fees .		
Summer 1	US Resident	Non-Resident / International
Tuition (6 credit hours)	\$3367	\$8452
Fall 1		
Tuition (12 credit hours)	\$5391	\$12757
Spring 1		
Tuition (15 credit hours)	\$5816	\$13187
Summer 2		
Tuition (5 credit hours)	\$2841	\$7163
Fall 2		
Tuition (11 credit hours)	\$5234	\$12605
Spring 2		
Tuition (6 credit hours)/ (9 credit hours)	\$3367 / \$4920	\$8931 / \$12291

2.10 Program Associated Cost

UL Lafayette MSAT Program anticipated costs associated with the program:	
Clinical Class and Lab Fee	\$20 each (total of 6 courses) = \$140
ATrack	\$90 for lifetime access
BOC prep workshop or class (in person/virtual)	\$195 /\$215

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NATA membership	\$119 annually
BOC Exam Fee	\$375 / exam
LA Licensure Fees	\$125
Criminal Background Check Fee*	\$46.25
Additional Program Fees	
Clothing: Students are encouraged to wear UL apparel to clinical sites. Students will be provided with attire but may need to purchase additional items to wear to clinical sites.	
Transportation: Students are responsible for their own transportation (i.e., car maintenance, gas, etc.) to and from class and to and from clinicals.	
Textbooks: Each course may have textbooks associated with the course. Students will need to purchase (buy or rent) the textbook to be prepared for class.	
Drug Test: Students must complete a drug test during their first summer semester that will remain valid as long as they remain enrolled in the program. If the student takes a leave of absence for any reason, a new drug test will be required upon return. Any cost associated with this test is the responsibility of the student. The cost may vary based on testing site (may be selected by the student).	
Immersive Clinical Experience Costs: students are responsible for all costs associated with their immersive clinical experience, including transportation, housing, and any site-specific requirements that incur financial obligations.	

*A criminal background check is required when applying for Louisiana athletic training licensure. Additionally, some secondary school and hospital systems that are affiliated with the program require students who are working with their patient population have a criminal background check prior to starting the clinical experience. It is for this reason that students will be required to complete a criminal background check prior to beginning clinical rotations in their first summer semester. The cost of the background check is the responsibility of the student. Students should bring proof of their background check to the Program Director to store in their file. Background check information and authorization forms can be found at <http://www.lsp.org/technical.html>.

2.11 MSAT Program Financial Assistance

UL Lafayette graduate students may apply for the following financial aid opportunities.

- Robert Elliot May Graduate Resident Tuition Fellowship: this aid provides resident (in-state) tuition to new non-resident (out of state and international) graduate students. To be eligible, a student must be a new student admitted to a degree seeking graduate program in regular admission status. Recipients must maintain continuous full-time enrollment (excluding summer sessions), remain in good academic standing, and make satisfactory progress toward the degree sought. Should a recipient accept a graduate assistantship or other tuition-waiver benefit, the resident tuition fellowship is forfeited.
- McNair Master's Scholar Program: this financial aid is awarded to Master's students who were undergraduate participants of the Ronald E. McNair Scholars Program. Financial aid includes Graduate School application fee, tuition, and fee waivers on a competitive basis.
- It's all About Helping People Non-Endowed Scholarship: the recipient of this scholarship must be a graduate student enrolled in the MSAT Program, must have and maintain a minimum 3.0 cumulative GPA, and be engaged in a UL Lafayette athletic support or internship role. This role includes clinical rotations. Recipients apply for this scholarship during the spring when the College of Education and Human Development mass scholarships open.
- College of Education and Human Development Graduate Student Scholarship: the recipient of this scholarship must be a graduate student enrolled within the College of Education and Human Development. Recipients apply for this scholarship during the spring when the College of Education and Human Development mass scholarships open.

2.12 Curriculum Sequence for 2024-2025

Year One					
<i>Summer</i>	<i>Cr Hrs</i>	<i>Fall</i>	<i>Cr Hrs</i>	<i>Spring</i>	<i>Cr Hrs</i>
KNES 516 Emergency Management	3	KNES 551 AT Clinical I	3	KNES 552 AT Clinical II	3
KNES 514 Clinical Practice	1	KNES 558 Therapeutic Modalities	3	KNES 511 Health Disparities	3
KNES 518 Prophylactic Aids	2	KNES 576 Exam & Care of LE & Spine Pathologies	3	KNES 525 Rehabilitation Techniques	3
		KNES 519 Research Methods for Clinicians	3	KNES 578 Exam & Care of UE & Head Pathologies	3
				KNES 521 Gen Med and Pharm	3
Total	6	Total	12	Total	15
				Year One Total	33

Year Two					
<i>Summer</i>	<i>Cr Hrs</i>	<i>Fall</i>	<i>Cr Hrs</i>	<i>Spring</i>	<i>Cr Hrs</i>
KNES 430G Admin & Leadership in HC	2	KNES 553 AT Clinical III	3	KNES 554 AT Clinical Immersion & BOC Prep	3
<i>Plus one of the following:</i>		KNES 523 Clinical Application	2	KNES 557 Professional Px for AT	3
<i>Non-Thesis Track:</i> KNES 545 Emergency Med for ATs	3	KNES 517 Behavioral Health in Sports Medicine	3	<i>Thesis Track:</i> KNES 599 Thesis	3
<i>Thesis Track:</i> KNES 599 Thesis	3	KNES 524 Evidence Based Medicine	3		
Total	5	Total	11	Total (non-thesis)	6
				Total (thesis)	9
				Year Two Total (non-thesis)	22
				Program Total (non-thesis)	55

2.13 Course Content and Course Descriptions

CLINICAL EXPERIENCE COURSES

** Clinical experience courses will be graded consistent with the MSAT Program’s grading policy (in Chapter 3’s *MSAT Program Clinical Education*) as well as the course syllabi. Students are not allowed to complete more than one clinical course per semester. If a student does not earn a B or higher in a clinical course, they will not be able to advance to their next clinical experience course without first completing that one.

KNES 551: Clinical Experience in Athletic Training I (3 credit hours). Under direct preceptor supervision, athletic training students will be provided the opportunity to understand, demonstrate, and apply the broad base of knowledge, skills, abilities required of the athletic trainer in managing patient problems in assigned clinical rotations. Review and competency-based demonstration of patient care skills, with an emphasis on emergency medicine;

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prophylactic aids; medical documentation; therapeutic modalities; prevention of lower extremity injuries; evaluation of lower extremity injuries.

KNES 552: Clinical Experience in Athletic Training II (3 credit hours). Under direct preceptor supervision, athletic training students will be provided the opportunity to understand, demonstrate, and apply the broad base of knowledge, skills, abilities required of the athletic trainer in managing patient problems in assigned clinical rotations. Review and competency-based demonstration of patient care skills, with an emphasis on general medicine; pharmacology; therapeutic rehabilitation; medical documentation; prevention of head and upper extremity injuries; evaluation of head and upper extremity injuries.

KNES 553: Clinical Experience in Athletic Training III (3 credit hours). Under direct preceptor supervision, athletic training students will be provided the opportunity to understand, demonstrate, and apply the broad base of knowledge, skills, abilities required of the athletic trainer in managing patient problems in assigned clinical rotations. Review and competency-based demonstration of patient care skills, with an emphasis on healthcare leadership and administration; evidence-based medicine with the clinical setting; interprofessional practice; medical documentation; prevention and management of injuries and illnesses; care plans for patient injuries.

KNES 554: AT Clinical Immersion & BOC Preparation (3 credit hours). Immersive clinical experience for athletic training students. Students will participate in the totality of care provided by an athletic trainer by immersing in the clinical field with an approved preceptor. During this class, students will also focus on preparing for their Board of Certification (BOC) examination.

ACADEMIC COURSES

HSA 500: Essentials of Population Health (3 credit hours). Introduction to the impact of multiple determinants on the health outcomes of populations.

KNES 430G: Administration and Leadership in Healthcare (3 credit hours). Administrative concepts and leadership strategies for those who work in healthcare facilities and provide medical services to the public. Topics covered include facilities design, budgetary procedures, management techniques, insurance and reimbursement, quality improvement, and healthcare informatics.

KNES 514: Clinical Practice and Patient Care (1 credit hour). Introduction course on clinical experiences and patient assessment. Designed to give students knowledge and skills in conducting a medical history and pre-participation physical examination, patient observation, anatomy and palpation skills, and performing medical histories and injury documentation on patients of all ages, cultures, socioeconomic backgrounds, and abilities.

KNES 516: Emergency Management for Healthcare Providers (3 credit hours). Prepares students to administer pre-hospital care for patients of all demographics. Will focus on emergency assessment and management of providing critical care to emergency medical situations, emergency action plans, ambulatory aids, plan of care, and interprofessional development.

KNES 517: Behavioral Health in Sports Medicine (3 credit hours). Learn to identify patients with behavioral health conditions to refer and collaborate with other healthcare professions. Focus on educating patients and the public about conditions, supporting patients, assisting with patient compliance, and incorporating psychosocial techniques.

KNES 518: Prophylactic Aids (2 credit hours). Select, fabricate, and/or customize prophylactic braces, devices, or materials. Will include competency-based skills related to taping, bracing, splinting, protective padding, protective equipment, casting, durable medical equipment, and orthotic devices.

KNES 519: Research Methods for Clinicians (3 credit hours). Research methods course aimed at students who are in the healthcare field. Applied statistics using parametric and non-parametric analyses, including computer applications, hypothesis testing, selection and use of statistical methodologies, interpretation of output, as well as evidence-based medicine, PICOT questions, and application of research within the clinical setting.

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KNES 521: General Medicine and Pharmacology (3 credit hours). Educational experiences in varied athletic training settings while caring for varying demographics. Competency-based skills related to general medical conditions; surgical interventions; recognition and referral skills related to systemic diseases, behavioral health conditions, and co-morbidities; pharmacological agents; working with other healthcare providers; educating patients; and determining a plan of care.

KNES 523: Clinical Application (2 credit hours). Experiences in athletic training settings. Competency-based skills related to clinical decision making, introducing common surgical procedures related to musculoskeletal injuries, and post-surgical rehabilitation protocols.

KNES 524: Evidence Based Medicine (3 credit hours). Provide students with knowledge of how to use evidence-based medicine in the clinical setting. Focus on developing PCIO questions, conducting a literature review, integrating research into clinical practice, assessing integrated data to modify plan of care, decision making based off EBP, components of EBP, and IOM's Core Competencies for the healthcare provider.

KNES 525: Therapeutic Rehabilitation (3 credit hours). Evidence-based concepts, principles, techniques, clinical assessment and application, documentation skills, creating/assessing/modifying care plans, and progression of therapeutic exercise for patients across the lifespan to remediate musculoskeletal and neurological dysfunction.

KNES 545: Emergency Medicine for Athletic Trainers (3 credit hours). Students will learn pre-hospital assessment, management, and referral process for patients of all populations experiencing traumatic and/or life-threatening injuries and illnesses. Upon successful completion of this course, students will be eligible to sit for the Emergency Medical Technician (basic) or Emergency Medical Responder licensure examination. *Students must possess a current BLS certification card.*

KNES 557: Professional Development for the Athletic Trainer (3 credit hours). Focus on professionalism and critical thinking skills as a medical provider. Topics will include state licensure, national certification, professional socialization, ethics, assessment of professional competence, development of goals, and advocating for athletic training.

KNES 558: Therapeutic Modalities (3 credit hours). Theory, principles, physiological effects, and comprehension of various therapeutic modalities effectiveness using a problem-solving approach. The course will also show students how to select and incorporate interventions based on evidence-based practice that will align with the patient's care plan.

KNES 576: Examination and Care of Lower Extremity and Spine Pathologies (3 credit hours). Examination procedures for on and off field clinical evaluation assessment and diagnosis of lower body and spine orthopedic injuries. Focus will be on evidence-based examination techniques, clinical skills and testing, protocols, referrals to healthcare providers, diagnostic and imaging testing, and care plans.

KNES 578: Examination and Care of Upper Extremity and Head Pathologies (3 credit hours). Examination procedures for on and off field clinical evaluation assessment and diagnosis of upper body orthopedic injuries as well as head injuries. Focus will be on evidence-based examination techniques, clinical skills and testing, protocols, concussion/brain trauma assessment, referrals to healthcare providers, diagnostic and imaging testing, and care plans.

KNES 599: Thesis Research and Thesis (6 credit hours).

2.14 Grading Policy

The MSAT Program follows the grading policies and grading system set forth by the university. Grades will be determined through the administration of any combination of written examinations/quizzes, practical examinations/quizzes, assignments, case studies, oral reports, projects, skills check sheets, CAATE standards checks, OSCEs, completion of clinical experience hours, and completion of clinical evaluations. While the professor for each

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class is in charge of the grading breakdown within their class, final grades are assigned based on the ten-point grading scale of your final average.

100%- 90%	= A	89%-80%	= B
79%-70%	= C	69%-60%	= D
Below 59%	= F		

2.15 Thesis and/or Capstone Requirements

In addition to required coursework, the MSAT requires that each student demonstrate a general, comprehensive knowledge of the field of study by completion of either a capstone project or a thesis and defense of thesis. Each student, along with their committee, will decide on a thesis or capstone project at the time of application to candidacy. Those who choose the thesis option will be required to take six hours of KNES 599 coursework. Those who choose to complete the capstone project will register for KNES 545; completion of this course will earn the student their Emergency Medical Responder Louisiana certification and will allow them to sit for their National Certification exams. Regardless of which option the student chooses, they must submit their documents for publication and/or presentation.

If the student is completing a capstone project, an agreement describing the capstone project requirements will be written by each student and approved by the committee chair; the student and all committee members will sign the agreement. If a student is completing a thesis, they will work with their committee chair to create and complete their own research in order to write their thesis document. Prior to graduation, the student must turn in their completed documents and present it to their committee members for review. A capstone project or thesis is officially accepted as satisfactory upon unanimous vote of the committee. If the student is unable to receive a unanimous vote for the fulfillment of the capstone project or the thesis requirements prior to the published deadline for submission of the thesis to the Graduate School for the current semester, the student will be required to register for an additional semester and continue until all requirements have been satisfied.

In addition to the Graduate School's capstone and thesis policy, the MSAT Program requires that all students who are enrolled in the program submit their research for publication or presentation. This addition will allow students to contribute research for others in their community and/or profession to learn from and allow them to see how to become lifelong learners.

Full details of the requirements are included in Appendix H.

2.16 Academic Dishonesty

The MSAT Program will follow the UL Lafayette's policy on student academic dishonesty (as per the UL Lafayette Student Handbook). Cheating and plagiarism are serious offenses. The minimum penalty for a student guilty of either dishonest act is a grade of "zero" for the assignment in question. The maximum penalty is dismissal from the university. Since cheating and plagiarism are violations of the university code of student conduct, an "F" grade assigned because of cheating and/or plagiarism must be reported to the Office of the Dean of Students, Room 211, Martin Hall. "Academic Dishonesty Report" forms to be completed and signed by both the instructor and the student are available from the Graduate School. The Code of Student Conduct is available at <http://ullafayettestudenthandbook.com/code-of-student-conduct-and-appeal-procedures>.

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2.17 MSAT Program Probation, Dismissal, and Appeals Process

Academic Probation/Dismissal. Students in the MSAT Program must follow the Graduate School academic requirements as well as the MSAT Program's academic and clinical requirements. A student who receives a "C" in a Graduate School course will be placed on academic probation for one semester. If a student drops below the 2.75 GPA requirement (semester or overall), receives a grade of a "D" or "F" in a graduate school course, or receives more than one "C" in a course, they will be recommended to the Dean of the Graduate School for dismissal from the MSAT Program and the Graduate School. Notification of dismissal from the program will be sent to the student by the Graduate School. The student must petition the Graduate School Appeal Committee, in writing, for consideration to stay within the Graduate School. The student must follow the Graduate School appeals procedure mentioned previously.

A student in violation of any article of the UL Lafayette Code of Student Conduct will be referred to the Office of the Dean of Students and/or Graduate School, with penalties ranging from University Probation to Dismissal from the University.

Programmatic Disciplinary Probation/Dismissal. A student violating the NATA Code of Ethics, Louisiana Athletic Training Law, UL Lafayette Code of Student Conduct, Confidentiality of Medical Information, and any other policies detailed in this policies and procedure handbook may be subject to disciplinary action from the MSAT Program.

Initial disciplinary action can include, but is not limited to, any of the following:

1. Issuance a grade of zero for the assignment during which the offense occurred.
2. Formal warning and counseling by an AT Program faculty member.
3. Suspension or dismissal from the student's clinical site
4. Incident Documentation form and counseling by preceptor.
5. Dismissal from the program based on the magnitude of the offense.

Secondary disciplinary action will result in a formal probationary period and can include, but is not limited to, any of the following:

1. Any offense of a student who has been formally warning and counseled by an AT Program faculty member.
2. Initial incident documentation form and counseling by AT Program faculty member or Preceptor if warranted by the situation.
3. Any subsequent incident documentation forms and counseling by AT Program faculty member and/or preceptor.
 - a. Recommendation to the Graduate School for formal dismissal from the AT Program as a result of any offense (related to a previous incident or any other violation of the policy and procedure manual) of a student who is formally on probation.

2.18 MSAT Program Grievance

Disagreement and conflict are inevitable when dealing with a large and diverse group of individuals. In dealing with these situations, students are reminded to act in a mature, professional, and ethical manner. Below are several recommendations that may assist in confronting these situations in a positive manner:

- Never try to settle a disagreement if either one or both of the parties involved are emotionally heated. Allow a cooling off period.
- Be proactive in problem solving, do not allow small problems or situations to escalate and become more difficult to resolve.
- Don't make assumptions. If you do not clearly understand assignments or requests, ask for immediate clarification. Lack of effective communication is the root of many situations.
- Attempt to resolve the problem directly with the person(s) with which the problem has occurred. Circumventing the source of the problem not only does NOT resolve the problem, but it also usually inflames the situation.

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The following is the chain of resolution for grievances and appeals of academic and disciplinary action within the UL Lafayette MSAT Program. All members of the MSAT Program are expected to follow this chain of resolution in order:

1. Attempt to resolve the problem directly with the student, instructor, preceptor, or other individual directly. Document this attempt including date, time, person(s) involved, and resolution of the conversation.
2. File a written letter of grievance or appeal, detailing relevant facts of the situation with the MSAT Program Director. Include a copy of the aforementioned resolution documentation from Step 1.
3. Consultation with the Director of the School of Kinesiology
4. Consultation with Dean of the College of Education
5. Consultation with the Dean of the Graduate School

If a situation is outside the scope of the MSAT Program, all appeals and grievances will then follow standard university procedures detailed in the UL Code of Student Conduct in section III-e of this handbook.

If a student has a grievance with a faculty member, they should contact the Dean of Students about the infringement and/or the Director of the School. If a student has a grievance with a preceptor, they should contact the Clinical Education Coordinator and/or Program Director. There is also the option of completing a paper incident form (Appendix B) or a digital incidence form on ATrack if students would prefer to report an incident that they witnessed but were not part of.

2.19 MSAT Program Assessment Policy

Frequent assessments will be required throughout the student's tenure in the MSAT Program. These tools will usually be designed as an assignment for clinical experiences as well as programmatic assessment tools such as student evaluation of instruction (SEI) or program questionnaires. The purpose of these evaluations is to ensure consistency and improvement within the MSAT Program, congruent with the MSAT Program Student Policies and Procedures, and CAATE 2020 Standards requirements.

2.20 MSAT Learning Lab and Tools

The MSAT Program learning lab is located inside the athletic training lab space in room 137-B. Additional equipment is located in the athletic training lab space as well as the athletic training classroom (room 142-B). The lab and program equipment are available only to AT students who have been admitted to the MSAT Program.

This space and equipment will be made available during regular school hours, 8am-5pm. To access certain tools, the students must have a faculty member present. The lab may be accessed at alternative times with prior permission from an athletic training faculty member.

General Policies:

- The MSAT Program learning lab and equipment are available only for enrolled MSAT students.
- The MSAT Program learning lab is for athletic training education and courses only. Please use the KNES computer lab for all other non-athletic training coursework and assignments.
- No food or beverage is allowed in the lab.
- MSAT students may NOT utilize therapeutic modalities unless directly supervised by AT or preceptor.
- Equipment is NOT to be removed from the MSAT Program lab under any circumstances.
- No horse-playing or loud and belligerent behavior; classrooms are immediately adjacent to the learning lab.
- MSAT students found to violate the general policies of the learning lab can lose learning lab privileges and, depending on the nature of the offense, can be referred to the Athletic Training Education Committee for disciplinary action.
- Use caution when utilizing MSAT Program learning lab equipment. The equipment in this lab is expensive and may be difficult to replace.
- A student found to have caused damage to MSAT Program learning lab equipment from inappropriate use or intentional destruction will lose their privileges of MSAT Program learning lab access and will be held

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financially responsible for all damages. Furthermore, additional disciplinary action may be taken by the Athletic Training Education Committee.

2.21 Therapeutic Modality Calibration

UL Lafayette MSAT Program will ensure that all therapeutic modalities are calibrated, and safety checked on an annual basis. Modalities within the Learning Lab will undergo annual review from Program Administrators to ensure therapeutic modalities which students have access to are calibrated and safety checked.

2.22 Radiation Policy

Students may have the possibility of working with radiating emitting equipment during research or clinical sites. Should students have the risk of exposure to radiation, the student will undergo additional orientation specific to the risk of radiation exposure procedures at that site. Those who have the potential for exposure to radiation while on UL Lafayette's campus (e.g., research, UL Lafayette athletics) will follow the university's standard operating procedures for working with radiation and will need to obtain approval from the Radiation Safety Committee prior and be trained by the university. Information about the university's radiation policy is located at <https://vpresearch.louisiana.edu/research-compliance/radiation-safety-committee/new-standard-operating-procedure-sop-university-work>.

2.23 UL Lafayette Sports Medicine Association

The purpose of the Sports Medicine Association (SMA) is to promote the involvement of Kinesiology students with their state, regional, and national organizations. The organization also offers the opportunity to enhance relationships between students and faculty in the School of Kinesiology and to provide social and academic learning opportunities outside of class. MSAT students are not required to be members of this club. Executive committee positions will be filled on a needed/ongoing basis.

Membership to the SMA requires a \$10 per semester membership fee. These fees will help support the SMA functions. Although membership consists mostly of AT students, membership is open to all Kinesiology students. For students interested in joining the Sports Medicine Association, or for more information contact any AT faculty member.

2.24 Email Communication

All email communication with faculty, staff, preceptors, etc. must be done through the student's UL Lafayette email accounts. All email communication should be conducted in a professional manner. Students are expected to respond to emails within 48 hours unless otherwise specified. Failure to maintain professional demeanor in email correspondence and/or habitual delayed responses may result in the student being placed on programmatic probation. In order to be removed from probation, the student must meet the criteria set forth by the Program Director. If the criteria are not met, the student may be at risk for clinical suspension. Any hours missed as a result of the suspension will need to be made up for full credit in the clinical course.

2.25 Social Media Policy

The following are guidelines for MSAT Program students who participate in social media (Facebook, Instagram, Twitter, Google+, TikTok, etc.). These guidelines apply whether individuals are posting to their own sites or commenting on other sites:

- 1) Follow all applicable UL Lafayette and MSAT Program policies. For example, you must maintain patient privacy. Among the policies most pertinent to this discussion are those concerning patient confidentiality, university affairs, mutual respect, photography and video, and release of patient information to media. Stating "posting with permission" in a photo caption is not sufficient to absolve yourself of a HIPAA violation.

- 2) Write in the first person. Where your connection to UL Lafayette and the MSAT Program is apparent, make it clear that you are speaking for yourself and not on behalf of UL Lafayette or the MSAT Program. In those

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circumstances, you should include this disclaimer: “The views expressed on this [blog; website] are my own and do not reflect the views of UL Lafayette or the MSAT Program.” Consider adding this language in an “About me” section of your blog or social media profile.

3) If you identify your affiliation to UL Lafayette or the MSAT Program, your social media activities should be consistent with UL Lafayette and MSAT Program’s high standards of professional conduct.

4) If you communicate to the public internet about UL Lafayette or MSAT Program-related matters, you must disclose your connection with UL Lafayette or MSAT Program and your role with them.

5) Be professional, use good judgment, and be accurate and honest in your communications. Errors, omissions, or unprofessional language or behavior that reflect poorly on UL Lafayette or the MSAT Program may result in liability for you, UL Lafayette, or the MSAT Program. Be respectful and professional to fellow students, faculty, staff, clinical affiliations, business partners, competitors, and patients. Before participating in any online community or network understand that anything posted online is available to anyone in the world. Any text or photo online is completely out of your control the moment it is placed online – even if you limit access to your site.

6) You may not follow patients on social media, nor allow patients to follow your personal social media accounts until after you graduate from the program, not just move on from that clinical site. Additionally, you should not post photos of or with current athletes or former athletes until you have graduated from the program. Exceptions for team photos may be made on case-by-case scenarios.

If students are violating these guidelines, they will be reported to UL’s Graduate School and/or Dean of Students. Sanctions may include written notification requiring that the unacceptable content be removed, temporarily suspension from the clinical experience, and probation within the Athletic Training Program, if applicable.

2.26 NATA Code of Ethics

Students enrolled within the MSAT Program at UL Lafayette must follow the Louisiana State Board of Medical Examiners rules and laws pertaining to athletic training and any additional guidelines set forth in the NATA Code of Ethics (shown below). If these rules and laws are broken, they will face disciplinary measures and reported to NATA.

Preamble

The National Athletic Trainers’ Association Code of Ethics states the principles of ethical behavior that should be followed in the practice of athletic training. It is intended to establish and maintain high standards and professionalism for the athletic training profession. The principles do not cover every situation encountered by the practicing athletic trainer but are representative of the spirit with which athletic trainers should make decisions. The principles are written generally; the circumstances of a situation will determine the interpretation and application of a given principle and of the Code as a whole. When a conflict exists between the Code and the law, the law prevails.

The National Athletic Trainers’ Association respects and values diversity amongst its members and patients served. Our members work respectfully and effectively with diverse patient populations in varied healthcare environments. The NATA prohibits discrimination based on race, ethnicity, color, national origin, citizenship status, religion (creed), sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, military status, family/parental status, income and socioeconomic status, political beliefs, or reprisal or retaliation for prior civil rights activity, or other unlawful basis, in any program or activity conducted or funded by the NATA (VATA, 2020). Important Professional Values (PV) shared by the NATA membership include: 1) Caring & Compassion, 2) Integrity, 3) Respect, 4) Competence, and 5) Accountability. These shared PV underpin the NATA Code of Ethics, motivate honorable interpersonal behaviors, and conduct in member’s interactions with all persons.

The Appendix to the Code of Ethics reveals a definition and sample behaviors for each shared PV.

Revised May 2024

PRINCIPLE 1. IN THE ROLE OF AN ATHLETIC TRAINER, MEMBERS SHALL PRACTICE WITH COMPASSION, RESPECTING THE RIGHTS, WELL-BEING, AND DIGNITY OF OTHERS

(PRINCIPLE 1 is associated with the PV of Respect, Caring & Compassion, and Competence.)

- 1.1 Members shall act in a respectful and appropriate manner to all persons regardless of race, religion, age, sex, ethnic or national origin, disability, health status, socioeconomic status, sexual orientation, or gender identity and expression.
- 1.2 Member's duty to the patient is the first concern, and therefore members are obligated to place the well-being and long-term well-being of their patient above other stakeholders to provide competent care in all decisions, and advocate for the best medical interest and safety of their patient as delineated by professional statements and best practices.
- 1.3 Members shall preserve the confidentiality of privileged information and shall not release or otherwise publish in any form, including social media, such information to a third party not involved in the patient's care without a release unless required by law.

PRINCIPLE 2. MEMBERS SHALL COMPLY WITH THE LAWS AND REGULATIONS GOVERNING THE PRACTICE OF ATHLETIC TRAINING, NATIONAL ATHLETIC TRAINERS' ASSOCIATION (NATA) MEMBERSHIP STANDARDS, AND THE NATA CODE OF ETHICS

(PRINCIPLE 2 is associated with the PV of Accountability.)

- 2.1. Members shall comply with applicable local, state, federal laws, and any state athletic training practice acts.
- 2.2. Members shall understand and uphold all NATA Standards and the Code of Ethics.
- 2.3. Members shall refrain from, and report illegal or unethical practices related to athletic training.
- 2.4. Members shall cooperate in ethics investigations by the NATA, state professional licensing/regulatory boards, or other professional agencies governing the athletic training profession. Failure to fully cooperate in an ethics investigation is an ethical violation.
- 2.5. Members must not file, or encourage others to file, a frivolous ethics complaint with any organization or entity governing the athletic training profession such that the complaint is unfounded or willfully ignore facts that would disprove the allegation(s) in the complaint.
- 2.6. Members shall refrain from substance and alcohol abuse. For any member involved in an ethics proceeding with NATA and who, as part of that proceeding is seeking rehabilitation for substance or alcohol dependency, documentation of the completion of rehabilitation must be provided to the NATA Committee on Professional Ethics as a requisite to complete a NATA membership reinstatement or suspension process.

PRINCIPLE 3. MEMBERS SHALL MAINTAIN AND PROMOTE HIGH STANDARDS IN THEIR PROVISION OF SERVICES

(PRINCIPLE 3 is associated with the PV of Caring & Compassion, Accountability.)

- 3.1. Members shall not misrepresent, either directly or indirectly, their skills, training, professional credentials, identity, or services.
- 3.2. Members shall provide only those services for which they are qualified through education or experience, and which are allowed by the applicable state athletic training practice acts and other applicable regulations for athletic trainers.
- 3.3. Members shall provide services, make referrals, and seek compensation only for those services that are necessary and are in the best interest of the patient as delineated by professional statements and best practices.
- 3.4. Members shall recognize the need for continuing education and participate in educational activities that enhance their skills and knowledge and shall complete such educational requirements necessary to continue to qualify as athletic trainers under the applicable state athletic training practice acts.
- 3.5. Members shall educate those whom they supervise in the practice of athletic training about the Code of Ethics and stress the importance of adherence.
- 3.6. Members who are researchers or educators must maintain and promote ethical conduct in research and educational activities.

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PRINCIPLE 4. MEMBERS SHALL NOT ENGAGE IN CONDUCT THAT COULD BE CONSTRUED AS A CONFLICT OF INTEREST, REFLECTS NEGATIVELY ON THE ATHLETIC TRAINING PROFESSION, OR JEOPARDIZES A PATIENT'S HEALTH AND WELL-BEING

(PRINCIPLE 4 is associated with the PV of Respect.)

- 4.1. Members should conduct themselves personally and professionally in a manner that reflects the shared professional values, that does not compromise their professional responsibilities or the practice of athletic training.
- 4.2. All NATA members, whether current or past, shall not use the NATA logo or AT logo in the endorsement of products or services, or exploit their affiliation with the NATA in a manner that reflects badly upon the profession.
- 4.3. Members shall not place financial gain above the patient's well-being and shall not participate in any arrangement that exploits the patient.
- 4.4. Members shall not, through direct or indirect means, use information obtained in the course of the practice of athletic training to try and influence the score or outcome of an athletic event, or attempt to induce financial gain through gambling.
- 4.5. Members shall not provide or publish false or misleading information, photography, or any other communications in any media format, including on any social media platform, related to athletic training that negatively reflects the profession, other members of the NATA, NATA officers, and the NATA office.

Appendix to Code of Ethics

Athletic Training's Shared Professional Values

Established from research conducted by the NATA Professional Responsibility in Athletic Training Committee in 2020, the following are the five shared professional values of athletic training.

Caring & Compassion is an intense concern and desire to help improve the welfare of another.

Sample behaviors include:

- 1) Listening for understanding and a readiness to help.
- 2) Focusing on achieving the greatest well-being and the highest potential for others.
- 3) Spending the time needed to provide quality care.

Integrity is a commitment that is internally motivated by an unyielding desire to do what is honest and right.

Sample behaviors include:

- 1) Providing truthful, accurate and relevant information.
- 2) Abiding by the rules, regulations, laws and standards of the profession.
- 3) Using applicable professional standards and established policies and procedures when taking action or making decisions.

Respect is the act of imparting genuine and unconditional appreciation and value for all persons.

Sample behaviors include:

- 1) Engaging in active listening when communicating with others.
- 2) Acknowledging and expressing concern for others and their well-being.
- 3) Acting in light of the belief that the person has value.

Competence is the ability to perform a task effectively with desirable outcomes.

Sample behaviors include:

- 1) Thinking critically, demonstrating ethical sensitivity, committing to evidence-based practice, delivering quality skills and effective collaboration.
- 2) Making sound decisions while demonstrating integrity.
- 3) Ongoing continuous quality assessment and improvement.

Accountability is a willingness to be responsible for and answerable to one's own actions.

Sample behaviors include:

- 1) Acknowledging and accepting the consequences of one's own actions.

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- 2) Adhering to laws, codes, practice acts and standards that govern professional practice.
- 3) Assuming responsibility for learning and change.

Reporting of Ethics Violations

Anyone having information regarding allegations of ethical violations, and wishing to supply such information to NATA, shall supply this information, with as much specificity and documentation as possible, to NATA's Executive Director or Chair of the Ethics Committee.

2.27 Louisiana Athletic Trainer's Law

Students enrolled within the MSAT Program at UL Lafayette must follow the Louisiana State Board of Medical Examiners rules and laws pertaining to athletic training. If these rules and laws are broken, they will face disciplinary measures and reported to the state.

Louisiana State Board of Medical Examiners

Louisiana Revised Statutes Title 37

Chapter 48. Athletic Trainers

§3301. Short title; purpose

A. This Chapter shall be known and may be cited as the Louisiana Athletic Trainers Law.

B. The purpose of this Chapter is to provide for the protection of public health, safety, and welfare by providing for the licensing and regulation of the practice of athletic trainers in this state.

Acts 1985, No. 288, §1; Acts 2014, No. 418, §1.

§3302. Definitions

As used in this Chapter, the following words and phrases have the meanings hereinafter ascribed to them:

(1) "Athlete" means an individual designated as such by the board, an educational institution, a professional athletic organization, or other board-approved organization who participates in an athletic activity sponsored by such institution or organization.

(2) "Athletic trainer" means an individual licensed by the board as an athletic trainer with the specific qualifications set forth in R.S. 37:3306.1 who, under the general supervision of a physician, carries out the practice of prevention, emergency management, and physical rehabilitation of injuries and sports-related conditions incurred by athletes. In carrying out these functions, the athletic trainer shall use whatever physical modalities are prescribed by a team physician or consulting physician, or both.

(3) "Board" means the Louisiana State Board of Medical Examiners.

(4) "Board-approved organization" means one of the following:

(a) Approved organization, including but not limited to the Amateur Athletic Union, the International Olympic Committee and its affiliates, the Pan American Sports Organization, the National Collegiate Athletic Association, the National Association of Intercollegiate Athletics, college and university intramural sports, and sports events of the National Federation of State High School Associations.

(b) An organization, whose athletic activity meets one or more of the following:

(i) Has an officially designated coach or individual who has the responsibility for athletic activities of the organization.

(ii) Has a regular schedule of practices or workouts that are supervised by an officially-designated coach or individual.

(iii) Is an activity generally recognized as having an established schedule of competitive events or exhibitions.

(iv) Has a policy that requires documentation of having a signed medical clearance by a licensed physician or other board-authorized healthcare provider as a condition for participation for the athletic activities of the organization.

(5) "BOC" means the Board of Certification, Inc. or its successor.

(6) "CAATE" means the Commission on Accreditation of Athletic Training Education or its successor.

(7) "Educational institution" means a university, college, junior college, high school, junior high school, or grammar school, whether public or private.

(8) "Emergency management" means the care given to an injured athlete under the general supervision of the team or consulting physician. To accomplish this care, an athletic trainer may use such methods as accepted first aid procedures approved by the American Red Cross, the American Heart Association, or protocol previously established by the athletic trainer and the team or consulting physicians.

(9) "General supervision" means the service is furnished under a physician's overall direction and control, but the physician's presence shall not be required during the provision of service.

(10) "Physician" means a person licensed to practice medicine by the board in the state who is qualified by training and experience to supervise an athletic trainer.

(11) "Physical rehabilitation" means the care given to athletes following injury and recovery. These treatments and rehabilitation programs may consist of preestablished methods of physical modality use and exercise as prescribed by a team physician, consulting physician, or both. Physical rehabilitation also includes working cooperatively with and under the general supervision of a physician with respect to the following:

(a) Reconditioning procedures.

(b) Operation of therapeutic devices and equipment.

(c) Fitting of braces, guards, and other protective devices.

(d) Referrals to other physicians, auxiliary health services, and institutions. Referrals will be made with the agreement of the athlete or, in the case of a minor, with the agreement of a parent or guardian except when circumstances require emergency transfer and the parent or guardian is unavailable.

(12) "Practice of prevention" shall include but is not limited to the following:

(a) Working cooperatively with supervisors and coaches in establishing and implementing a program of physical conditioning for athletes.

(b) Applying protective or injury-preventive devices such as taping, padding, bandaging, strapping, wrapping, or bracing.

(c) Working cooperatively with supervisors, coaches, and a team physician or consulting physician in the selection and fitting of protective athletic equipment for each athlete and constantly monitoring that equipment for safety.

(d) Counseling and advising supervisors, coaches, and athletes on physical conditioning and training such as diet, flexibility, rest, and reconditioning.

Acts 1985, No. 288, §1; Acts 2014, No. 418, §1; Acts 2018, No. 206, §3.

Source: <http://www.legis.state.la.us/> accessed 11/13/2018

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accordance with the procedure established by the board and upon payment of the renewal fee.

Acts 1985, No. 288, §1; Acts 2014, No. 418, §1.

§3308. Repealed by Acts 2014, No. 418, §2.

§3308.1. Causes for denial, revocation, or suspension; imposition of restrictions; costs; fines

A. The board may refuse to issue a license to an applicant or may suspend, or revoke or impose probationary terms, conditions, or restrictions on any license issued pursuant to this Chapter if any of the following is applicable to the licensee or applicant:

(1) Has been convicted of or entered a plea of guilty or nolo contendere to a criminal charge constituting a felony under the laws of Louisiana, of the United States, or of the state in which such conviction or plea was entered.

(2) Has been convicted of or entered a plea of guilty or nolo contendere to any criminal charge arising out of or in connection with the practice of an athletic trainer.

(3) Commits perjury, fraud, deceit, misrepresentation, or concealment of material facts in obtaining a license to practice as an athletic trainer.

(4) Provides false testimony before the board or provides false sworn information to the board.

(5) Engages in habitual or recurring abuse of drugs, including alcohol, which affect the central nervous system and which are capable of inducing physiological or psychological dependence.

(6) Solicits patients or self-promotion through advertising or communication, public or private, which is fraudulent, false, deceptive, or misleading.

(7) Makes or submits false, deceptive, or unfounded claims, reports, or opinions to any patient, insurance company, indemnity association, company, individual, or governmental authority for the purpose of obtaining anything of economic value.

(8) Demonstrates cognitive or clinical incompetency.

(9) Engages in unprofessional conduct.

(10) Engages in continuing or recurring practice which fails to satisfy the prevailing and usually accepted standards of practice as an athletic trainer in this state.

(11) Knowingly performs any act which in any way assists an unlicensed person to practice as an athletic trainer, or having professional connection with or lending one's name to an illegal practitioner.

(12) Pays or gives anything of economic value to another person, firm, or corporation to induce the referral of injured athletes to an athletic trainer.

(13) Has been interdicted by due process of law.

(14) Is unable to practice as an athletic trainer with reasonable competence, skill, or safety to patients because of mental or physical illness, condition, or deficiency, including but

not limited to deterioration through the aging process or excessive use or abuse of drugs, including alcohol.

(15) Refuses to submit to an examination and inquiry by an examining committee of physicians appointed by the board to inquire into the applicant's or licensee's physical or mental fitness and ability to practice as an athletic trainer with reasonable skill or safety.

(16) Practices or otherwise engages in any conduct or functions beyond the scope of practice of an athletic trainer as defined by this Chapter or the board's rules.

(17) Has been subjected to the refusal of the licensing authority or another state to issue or renew a license, permit, or certificate to practice as an athletic trainer in that state, or the revocation, suspension, or other restriction imposed on a license, permit, or certificate issued by such licensing authority which prevents, restricts, or conditions practice, or the surrender of a license, permit, or certificate issued by another state when criminal or administrative charges are pending or threatened against the holder of such license, permit, or certificate.

(18) Has been subjected to denial, revocation, suspension, probation, or other disciplinary sanction from the BOC or its successor for violation of the standards of professional practice.

(19) Violated any rules and regulations of the board, or any provisions of this Chapter.

B. The board may, as part of a decision, consent order, or other agreed order, require the applicant or license holder to pay all costs of the board's proceedings and a fine not to exceed one thousand dollars.

Acts 2014, No. 418, §1.

§3309. Repealed by Acts 2014, No. 418, §2.

§3309.1. Hearing; consent order

A. Denial, refusal to renew, suspension, or revocation of a license, or the imposition of probationary terms, conditions, or restrictions upon a licensee, may be ordered by the board in a decision made after a hearing in accordance with procedures established by the Administrative Procedure Act, R.S. 49:950 et seq., or by consent of the parties.

B. Any license suspended, revoked, or otherwise restricted may be reinstated by the board.

Acts 2014, No. 418, §1; Acts 2018, No. 206, §3.

§3310. Repealed by Acts 2014, No. 418, §2.

§3311. Exemptions

A. No provision of this Chapter shall be construed to limit or prevent any person duly licensed or certified under the laws of this state from practicing the profession for which he is licensed or certified.

Source: <http://www.legis.state.la.us/> accessed 11/13/2018

Louisiana Revised Statutes Title 37

§3303. Louisiana State Board of Medical Examiners; powers and duties

A. In addition to the powers and authority established by R.S. 37:1270, the board shall:

(1) Keep a record of its proceedings regarding the regulation and licensure of athletic trainers.

(2) Keep a complete roster of all licensed athletic trainers and make a copy of the roster available to any person requesting it on payment of a fee established by the board as sufficient to cover the costs of the roster.

(3) License athletic trainers in a manner consistent with the provisions of this Chapter.

(4) Adopt rules and regulations necessary for the performance of its duties.

(5) Prescribe application forms for licensure.

(6) Establish guidelines for athletic trainers in the state.

(7) Approve, deny, revoke, suspend, probate, and renew licensure of a duly qualified applicant.

(8) Conduct administrative hearings on the denial, suspension, revocation, or refusal to issue or renew a license.

B. The board shall require continuing education units to maintain licensure.

C. The board shall, pursuant to the authority granted in R.S. 37:1281(A)(2), establish and collect fees in accordance with its rules for the purposes of carrying out the provisions of this Chapter.

D. The fees collected pursuant to the provisions of this Chapter shall be deposited in the treasury of the Louisiana State Board of Medical Examiners.

Acts 1985, No. 288, §1; Acts 2014, No. 418, §1.

§3304. Exemptions from civil liability

A. There shall be no liability on the part of and no action for damages against any member of the board or its agents or employees in any civil action for any act performed in good faith in the execution of his duties under this Chapter.

B. No person, committee, association, organization, firm, or corporation shall be held liable for damages pursuant to any law of the state of Louisiana or any political subdivision thereof for providing information to the board without malice and under the reasonable belief that such information is accurate, whether providing such information as a witness or otherwise.

Acts 1985, No. 288, §1; Acts 2014, No. 418, §1.

§3305. Repealed by Acts 2014, No. 418, §2.

§3305.1. Prohibited activities; false representation

A. A person who is not licensed pursuant to this Chapter as an athletic trainer or whose license has been suspended or revoked shall not perform any of the following:

(1) Activities of an athletic trainer as defined in this Chapter.

(2) Use in connection with his name or place of business the words "trainer", "licensed athletic trainer", "athletic trainer", "certified athletic trainer", "teacher/trainer", "first aid trainer", "sports trainer", "sports medic", the abbreviations "LAT", "ATC", "AT", or any other words, letters, abbreviations, or insignia indicating or implying that he is an athletic trainer, or in any way, orally, in writing, in print or by sign, directly or by implication, represent himself as an athletic trainer.

B. However, nothing in this Chapter shall prevent an assigned athletic coach from administering and supervising his normal sports activities.

Acts 2014, No. 418, §1.

§3306. Repealed by Acts 2014, No. 418, §2.

§3306.1. Qualifications

A. A person who applies for an athletic trainer license shall possess all of the following qualifications:

(1) A certificate issued by the BOC evidencing the successful passage of the BOC Certification Examination or its successor.

(2) A degree in athletic training from a CAATE accredited program, or such comparable degree accepted by the BOC and approved by the board.

(3) Good moral character as determined by rules established by the board.

B.(1) Any person certified by the board as a certified athletic trainer on the effective date of this Subsection shall be issued a license by the board, without meeting the requirements of Subsection A of this Section, upon the submission of a renewal license application and payment of the applicable renewal fee to the board.

(2) After a period of one year from the effective date of this Subsection, no athletic trainer shall be licensed pursuant to the provisions of R.S. 37:3306.1(B)(1).

Acts 2014, No. 418, §1.

§3307. Requirements for licensure

A. A person who wishes to apply for an athletic trainer license shall apply to the board in a manner prescribed by the board.

B. The applicant shall be entitled to an athletic trainer's license if he possesses the qualifications enumerated in R.S. 37:3306.1 and the rules and regulations established by the board, pays the license fee established by the board, and has not committed an act which constitutes grounds for denial of a license under R.S. 37:3308.1.

C. Every license issued under this Chapter shall expire and become null and void unless renewed annually in

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accordance with the procedure established by the board and upon payment of the renewal fee.

Acts 1985, No. 288, §1; Acts 2014, No. 418, §1.

§3308. Repealed by Acts 2014, No. 418, §2.

§3308.1. Causes for denial, revocation, or suspension; imposition of restrictions; costs; fines

A. The board may refuse to issue a license to an applicant or may suspend, or revoke or impose probationary terms, conditions, or restrictions on any license issued pursuant to this Chapter if any of the following is applicable to the licensee or applicant:

(1) Has been convicted of or entered a plea of guilty or nolo contendere to a criminal charge constituting a felony under the laws of Louisiana, of the United States, or of the state in which such conviction or plea was entered.

(2) Has been convicted of or entered a plea of guilty or nolo contendere to any criminal charge arising out of or in connection with the practice of an athletic trainer.

(3) Commits perjury, fraud, deceit, misrepresentation, or concealment of material facts in obtaining a license to practice as an athletic trainer.

(4) Provides false testimony before the board or provides false sworn information to the board.

(5) Engages in habitual or recurring abuse of drugs, including alcohol, which affect the central nervous system and which are capable of inducing physiological or psychological dependence.

(6) Solicits patients or self-promotion through advertising or communication, public or private, which is fraudulent, false, deceptive, or misleading.

(7) Makes or submits false, deceptive, or unfounded claims, reports, or opinions to any patient, insurance company, indemnity association, company, individual, or governmental authority for the purpose of obtaining anything of economic value.

(8) Demonstrates cognitive or clinical incompetency.

(9) Engages in unprofessional conduct.

(10) Engages in continuing or recurring practice which fails to satisfy the prevailing and usually accepted standards of practice as an athletic trainer in this state.

(11) Knowingly performs any act which in any way assists an unlicensed person to practice as an athletic trainer, or having professional connection with or lending one's name to an illegal practitioner.

(12) Pays or gives anything of economic value to another person, firm, or corporation to induce the referral of injured athletes to an athletic trainer.

(13) Has been interdicted by due process of law.

(14) Is unable to practice as an athletic trainer with reasonable competence, skill, or safety to patients because of mental or physical illness, condition, or deficiency, including but

not limited to deterioration through the aging process or excessive use or abuse of drugs, including alcohol.

(15) Refuses to submit to an examination and inquiry by an examining committee of physicians appointed by the board to inquire into the applicant's or licensee's physical or mental fitness and ability to practice as an athletic trainer with reasonable skill or safety.

(16) Practices or otherwise engages in any conduct or functions beyond the scope of practice of an athletic trainer as defined by this Chapter or the board's rules.

(17) Has been subjected to the refusal of the licensing authority or another state to issue or renew a license, permit, or certificate to practice as an athletic trainer in that state, or the revocation, suspension, or other restriction imposed on a license, permit, or certificate issued by such licensing authority which prevents, restricts, or conditions practice, or the surrender of a license, permit, or certificate issued by another state when criminal or administrative charges are pending or threatened against the holder of such license, permit, or certificate.

(18) Has been subjected to denial, revocation, suspension, probation, or other disciplinary sanction from the BOC or its successor for violation of the standards of professional practice.

(19) Violated any rules and regulations of the board, or any provisions of this Chapter.

B. The board may, as part of a decision, consent order, or other agreed order, require the applicant or license holder to pay all costs of the board's proceedings and a fine not to exceed one thousand dollars.

Acts 2014, No. 418, §1.

§3309. Repealed by Acts 2014, No. 418, §2.

§3309.1. Hearing; consent order

A. Denial, refusal to renew, suspension, or revocation of a license, or the imposition of probationary terms, conditions, or restrictions upon a licensee, may be ordered by the board in a decision made after a hearing in accordance with procedures established by the Administrative Procedure Act, R.S. 49:950 et seq., or by consent of the parties.

B. Any license suspended, revoked, or otherwise restricted may be reinstated by the board.

Acts 2014, No. 418, §1; Acts 2018, No. 206, §3.

§3310. Repealed by Acts 2014, No. 418, §2.

§3311. Exemptions

A. No provision of this Chapter shall be construed to limit or prevent any person duly licensed or certified under the laws of this state from practicing the profession for which he is licensed or certified.

Source: <http://www.legis.state.la.us/> accessed 11/13/2018

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B. The provisions of this Chapter shall not apply to any athletic trainer who is employed in another state by an educational institution or athletic organization when he accompanies the athletes or team of such institution or organization into this state for the purpose of an athletic contest.

C. The provisions of this Chapter shall not apply to any athletic training student pursuing a course of study leading to a degree in athletic training at an institution whose program is accredited, recognized, or approved by the CAATE, if such activities and services constitute a part of a supervised course of study and the individual's status is designated by a title which clearly indicates his status as an "athletic training student".

Acts 1985, No. 288, §1; Acts 2014, No. 418, §1.

§3312. Penalty

Any person who violates any provision of this Chapter shall be guilty of a misdemeanor and shall be punished by a fine of not less than twenty-five dollars, nor more than five hundred dollars, or be imprisoned in parish jail for not more than six months, or both.

Acts 1985, No. 288, §1.

§3313. Display of license

A license and renewal issued pursuant to the provisions of this Chapter shall be conspicuously displayed in the principal office of the licensee. Licensees shall, upon request, present proof of state licensure when engaged in professional activities as a licensed athletic trainer (LAT).

Acts 2014, No. 418, §1.

Chapter 3: Master of Science in Athletic Training Clinical Education

3.1 Preceptors and Clinical Sites

Preceptors are identified and approved by the Clinical Education Director per CAATE Standards. All preceptors must complete preceptor training annually to appropriately educate, assess, and debrief students with their clinical skills and knowledge. Preceptors should refer to the UL Lafayette Preceptor Manual for more information.

Clinical sites will be assessed by the Clinical Education Coordinator (CEC) annually. UL Lafayette MSAT Program will ensure that all therapeutic modalities are calibrated, and safety checked on an annual basis. All clinical education sites will undergo annual review from Program Administrators to ensure therapeutic modalities which students have access to are calibrated and safety checked. In addition to modality calibrations, the CEC will complete clinical site visitation for all sites each semester. During these visitations, the CEC will observe the preceptor and student interaction, student interaction with the patients at the clinical site, and quality of clinical education.

A list of clinical sites and their associated preceptors that are approved by the program and have a clinical education contract are located on the program's website.

3.2 Confidentiality of Medical and Educational Information

The UL Lafayette MSAT Program requires all students to respect and comply with confidentiality of a patient's personal and medical information. Throughout the course of the clinical education process, students will be exposed to a significant amount of personal and medical information as it relates to the treatment of patients.

The student should exercise caution in using Personally Identifiable Health Information (PIH). PIH includes name, Social Security number, insurance information, phone number, address, prognosis, diagnosis, and treatment. PIH should be used only as it directly relates to managing the care of the patient.

Legislation by the Federal Government, HIPAA (Health Insurance Portability and Accountability Act) and FERPA (Family Educational Rights and Privacy Act), further governs the handling and use of PIH, see Policies and Procedures section IV(h).

Discussion and sharing of clinical experiences are encouraged and beneficial to the overall educational experience. However, when discussing clinical experiences, refrain from using any specific and personal information (PIH) that may identify a particular patient or athlete.

Students suspected of violating patient confidentiality, intentional or unintentional, will be referred to the Master of Science in Athletic Training Education Committee for review and possible disciplinary action, including probation or dismissal from the program. If a student is found guilty of intentionally divulging PIH for personal gain or with the intent to embarrass or coerce a patient, the MSAT student will be immediately suspended from the MSAT Program and referred to the UL Lafayette Dean of Students as well as Dean of the College for further disciplinary action. A representative of the program may involve additional departments on campus including but not limited to the Title IX Office, The Office of Student Rights and Responsibilities, etc. to appropriately handle the situation based on the suspected violation.

3.3 Clinical Site Confidentiality

Through the matriculation through the UL Lafayette MSAT Program, students will be exposed to a variety of clinical education settings, management styles, and business practices. During these experiences, students may be exposed to sensitive operational procedures and business practices of individual clinics and athletic training rooms. This information may include, but is not limited to, budgeting, staff salaries, staffing numbers, planning, or specific treatment protocols.

The UL MSAT Program prohibits students from sharing potentially sensitive information as they move from one clinical experience to another. If the MSAT student is uncertain about sharing specific information, then the MSAT student should refrain from commenting. A student guilty of divulging sensitive information may be referred to the Graduate School and/or Dean of Students for review and possible disciplinary action.

3.4 Clinical Education Description

Students must demonstrate a willingness to complete the clinical assignments necessary for CAATE 2020 Standard compliance. Students will be placed at sites that allow for interprofessional practice, a variety of health conditions, and diverse clinical practice experiences throughout their time in the program. Clinical experiences and supplemental clinical experiences will follow a logical progression of increasingly complex and autonomous patient-care experiences that will lead to a student's immersive experience. Clinical site placements will be based on student strengths and weaknesses, academic performance, professionalism, variety of health conditions, as well as diverse clinical practice opportunities. These clinical practice opportunities will allow students to work with a varied patient population that includes patients throughout the lifespan, gender, socioeconomic status, varying levels of activity and athletic ability, active and non-sport activities, upper versus lower extremity focused sports, different health conditions, varying levels of risk, protective equipment, and medical experiences. These opportunities will be gained at UL athletics, secondary schools, general medicine clinics/hospitals, orthopedic clinics/hospitals, and immersive sites.

To ensure proper progress in accruing clinical experiences, the student must complete the outlined minimal clinical requirements to continue progress in the program.

3.5 ATrack Software System

Students within the MSAT Program are responsible for purchasing an ATrack membership. Within this online system, students will enter their clinical and supplemental experience hours, patient contacts, complete site and preceptor clinical education evaluations, be able to see their mid-season and final clinical educational evaluations, complete documentation for multiple MSAT Program courses, and enter patient encounter summaries. These digital files will be used for CAATE Accreditation purposes, MSAT Programmatic assessment tools, and for a student's future needs.

3.6 Clinical Education Requirements

Hours

Each semester, students are required to get a minimum number of hours to complete for the clinical component of their clinical experience course. These clinical hours should be quality in nature, allowing students opportunities for quality patient care, monitored injury evaluations and practical skills, and completion of care plans. Clinical skill requirements are scaffolded; as a student gains more athletic training knowledge, the required number of clinical skills increases. This will allow students to work towards autonomous practice and competence of skills. Students should be receiving a minimum of one day off a week during their clinical experience courses per CAATE requirements. The CEC will check clinical hours periodically throughout the semester and will discuss with students if they are above or below their clinical hour requirements.

The hour ranges outlined below should be quality in nature and allow for flexibility in hours accumulated for one week (Sunday to Saturday). These restricted hours allow students to increase progression towards autonomy yet limit clinical experience time in order to focus on a rigorous (high credit-hour) semester within the program. The increasing hours by semester allow students to increase progression towards autonomy, as they prepare to enter the final semester of an immersive clinical experience. Any weekly hours that extend beyond the maximum must be approved by the Clinical Education Coordinator prior to completion of the hours. If approval is not gained, students may not log the additional hours on ATrack.

Revised May 2024

Students are required to have 1 day off a week per CAATE regulations. If the student does not adhere to the clinical expectations set forth by the preceptor, and/or is not meeting the clinical expectations of the MSAT faculty during their experiences, they may face programmatic disciplinary action. These increasing hours by semester allow students to gain progression towards autonomy, as they prepare to enter the final semester of a clinical immersion.

Hour check ins will occur at periodic intervals during the semester to confirm students are attending their clinical sites regularly.

Students should plan ahead for anticipated time away from clinical that may impact the ability to earn hours, for example fall break, thanksgiving break, spring break (both of UL and their respective clinical sites).

First Year Fall Semester: Students are expected to complete 13-16 hours of clinical experience per week, on average, under the direct supervision of an assigned preceptor for a total of 182-224 hours during the semester.

First Year Spring Semester: Students are expected to complete 15-18 hours of clinical experience per week, on average, under the direct supervision of an assigned preceptor for a total of 224-252 hours during the semester.

Second Year Fall Semester: Students are expected to complete 18-22 hours of clinical experience per week, on average, under the direct supervision of an assigned preceptor for a total of 252-308 hours during the semester.

Second Year Spring Semester: This final immersive clinical experience is practice-intensive and allows the student to experience the totality of care provided by athletic trainers. Students must participate in the day-to-day and week-to-week role of an athletic trainer for a period of time identified by the program (8 weeks). There is not a maximum hour requirement for this experience, but at minimum, students should be logging 30 hours per week. Ultimately, the final schedule of the student is at the discretion of the preceptor, but the programmatic expectation is that the student is engaged with the preceptor and patients in a full-time capacity (when the preceptor is there, the student is there). Students will only engage in online educational activities during the immersive clinical experience, to not detract from the nature of the immersive clinical experience.

To ensure that ATs are adhering to the expectations of their clinical assignments, all MSAT students will complete a clinical experience schedule and submit it to the Clinical Coordinator by **Friday of the first week of each semester**. Failure to complete a clinical experience schedule will result in an immediate suspension of clinical experiences until the clinical experience schedule is received. Students will be responsible for making up any hours missed during their suspension.

For traditional education experiences (KNES 551, 552, 553), during university closures, students will not be required to complete clinical experience hours; however, the student may choose to continue with their assigned clinical experience. Any student who volunteers for clinical experiences during university closures is still subject to MSAT Program policies and procedures. Students engaging in their immersive clinical experience (KNES 554) should follow the guidance of their clinical site related to closures. Students in all clinical experiences are responsible for meeting the hour requirements regardless of planned (spring break, holidays, etc.) or unplanned (weather) closures.

All clinical experience hours and relief times must be documented in the student ATrack portfolio. Students assigned to clinical experiences with athletic teams should develop a clinical schedule with the assistance of their preceptor that allows for experiences in practice, game, and travel situations. Students in rehabilitation settings should develop a clinical schedule with the assistance of their preceptor that allows for experiences with upper extremity, lower extremity, and patients of various demographics.

Attendance at Clinical Experiences

Students are expected to be at preceptor communicated events and learning opportunities (i.e., rehabilitation sessions, practices, pre-game walk-throughs, games, educational learning “teach-ins”) for their assigned clinical experience. Students who must miss an event (e.g., practice or game) must coordinate this time off with their supervising preceptor prior to the absence.

Students are allowed to travel with a team and are encouraged to do so if it does not conflict with academic requirements. Missing class for travel is at the discretion of the course instructor(s). Students missing class for travel are responsible for all missed coursework and must have written documentation from the instructor for the absence to not count against the attendance policy. Once documented and approved by the course instructor, students must then obtain approval from the Clinical Education Coordinator.

If a student is considered chronically absent or tardy (more than 3 per rotation) due to illness, documentation from a MD/ DO/ NP/PA-C will be required before returning to your clinical experience. Students may be required to make up the time lost from a clinical experience due to illness or other extenuating circumstance that resulted in prolonged clinical absence.

If a student is considered chronically tardy or absent (more than 3 per rotation) for other reasons, the preceptor has the right to refuse access to the clinical experience for the day and require the time be made up at another time during the clinical experience. Excessive or chronic absenteeism or tardies will result in the lowering of overall grade in the respective Clinical Athletic Training Course by one-half of a letter grade and may be subject to further programmatic disciplinary action as deemed appropriate by the Program Director and/or the Clinical Education Coordinator.

If a student is not actively learning, their preceptors have a right to not approve those hours or to send them home.

When inputting clinical hours, students should write in the comments section patients that they were in contact with as well as any additional information that allows the CEC to see the experience for that day.

Clinical hours are to be obtained under direct supervision of your preceptor.

Hours cannot be gained when traveling to a clinical site or when interaction between the student and preceptor is not available.

All hours will be logged in the ATrack system within 3 days of the hours. Failure to log hours within the 3 day window will result in those hours not counting toward the overall hour requirement and therefore may be subject to grade deductions. Students will not be penalized if the preceptors do not approve the logged hours in a timely manner.

Patient Contact and Patient Encounters

Students will be asked to track patient contacts and patient encounters during their four clinical experiences. Patient contacts should be input daily when a student inputs their clinical hours. This metric measures the number of patients that the student interacts with at their site. For a student to count a patient contact, they must be practicing one of the five athletic training domains (risk reduction, wellness, and health literacy; assessment, evaluation, and diagnosis; clinical incident management; therapeutic intervention; healthcare administration and professional responsibility). Preceptors have the right to make a list of acceptable patient contacts that will be counted at that site. Students are to note the patients that they interacted with in their hour's comments.

Students must record patient encounters each week during their clinical experiences. These encounters should be linked to a clinical experience day. These encounters can be mock patients, simulations, or real time injuries that

they experienced at their clinical sites; a preceptor or faculty member must be attached to these experiences so that they can be approved. The expectation is for a minimum of 1 patient encounter per week during KNES 551, 2 per week during KNES 552, 3 per week during KNES 553, and 4 per week during KNES 554. These can be “double dipped” when completing the ATrack Standards requirements as well.

Throughout their graduate careers, students must document that they have had encounters with the following: emergent, behavioral/mental health, musculoskeletal, neurological, endocrine, dermatological, cardiovascular, respiratory, gastrointestinal, genitourinary, ears/nose/throat, ophthalmological, dental, and environmental conditions. **If they do not show that they have experienced, and documented, all of these situations (mock patient scenarios are allowed if needed) by the last day of their immersive experience, they will automatically earn a C in KNES 554 and cannot graduate from the MSAT Program with the conditions missing (per CAATE guidelines). Students would need to re-take that clinical course at its next typical offering (spring).**

Clinical Education Grades

In order to advance to the next clinical rotation and class, students must pass their AT Clinical Experience class with a “B” or better, have achieved a 70-85% (depending on semester) or higher OSCE, earn the required number of quality clinical hours, complete the required number of patient encounters, and follow the program’s clinical standards. If students do not meet all of these requirements, they will, at minimum, automatically receive a grade of a “C” and must repeat the course at its next typical offering as they have not shown proficiency at their academic and clinical knowledge and skill level. They may also risk academic dismissal as deemed appropriate by the Dean of the Graduate School.

If all other aforementioned metrics for progression are met, but a student earns less than a 70% on their final evaluation by the preceptor, the student will be required to have a meeting with the CEC & PD to discuss the areas for improvement and create an improvement plan for their next clinical rotation.

3.7 Clinical Education Assessment

Along with the required course work each semester throughout the MSAT curriculum, each student will be required to submit documents related to their individual clinical experience as well as the required number of quality clinical hours.

Each student will be evaluated by their preceptor at their assigned clinical site and count as a grade for their clinical experience; supplemental clinical experience evaluations will not count towards the students’ clinical grades. Clinical evaluations were created for the clinical experience course that the student is currently in. These assessment tools evaluate knowledge and skills retention of previous course work as well as student soft skills. Additional requirements of the clinical site not tied specifically to knowledge and skills retention are also required. The complete evaluation process includes:

1. Learning contract (Appendix C)
2. Mid-semester Clinical Education Evaluation
 - a. Preceptors should give feedback to students on how to better their performance.
3. Final Clinical Education Evaluation
4. CAATE Standards assigned to each clinical course
5. Objective Structured Clinical Examination/Standardized Patients
6. Hours log

The learning contract (Appendix C) will be distributed on the first day of a student’s clinical course and be due no later than one week later. The mid-semester and final clinical education evaluations will be completed on the ATrack system. It is the student’s responsibility to ask their preceptor to complete these assessments and communicate the due dates of the tools. If preceptors are not given adequate notice of an evaluation being due by the student, they

do not have to rush to complete forms by a due date. As these evaluations are the student's responsibility to communicate to their preceptors, the student's procrastination is not the preceptor's emergency.

Professional Development Units (PDU)

A Professional Development Unit (PDU) for an athletic training student refers to a structured and purposeful learning experience designed to enhance the student's skills, knowledge, and professionalism in the field of athletic training. PDUs are an integral part of an athletic training education program, providing students with opportunities to gain practical experience, engage in continuous learning, and develop the essential competencies required for a successful career in athletic training.

While the MSAT faculty may present opportunities to earn PDUs to students, the student is ultimately responsible for seeking out opportunities and completing them accordingly. If a potential PDU opportunity arises that was not presented by an MSAT faculty member, the student should confirm with the CEC that the event will meet the requirements for PDUs. Any unapproved events may result in the PDUs not being counted toward the total.

PDUs are completed in addition to the assigned clinical site. If a student misses a clinical day for PDUs, they are still expected to complete the hours missed at clinical. PDUs do not replace clinical hours. Students may not miss class for PDUs unless approval is granted by the instructor in advance.

Students must complete 20 PDUs during Fall 1, 25 PDUs during Spring 1, and 30 PDUs during Fall 2. 1 hour = 1 PDU.

Professional Development Units may include:

Clinical Experiences: Hands-on clinical experiences, working directly with athletes under the supervision of certified athletic trainers, physicians, or other allied health professionals. Students must obtain permission from the supervising professional prior to attending. This type of event allows students to apply theoretical knowledge to real-world scenarios, honing their clinical skills and decision-making abilities. These experiences may not be completed at the students' assigned clinical site. Some examples may be assisting with UL football home games, helping with annual UL PPEs, dance treatment days, assisting with large scale tournaments at a high school, etc. Students may not count PDUs if attendance at the event is a graded course requirement, nor if the student is getting paid to be there. Students may not earn all PDUs per semester from this category. The maximum number of PDUs that may be earned from this category are as follows: 15 Fall 1, 20 Spring 1, 25 Fall 2.

Continuing Education: PDUs may involve attending workshops, conferences, seminars, or webinars focused on the latest advancements, research findings, and best practices in athletic training or related fields. This ensures that students stay informed about industry trends and maintain a commitment to lifelong learning. Some examples from this category could be attending SEATA, NATA symposium, LATA conference, UL sponsored workshops like Ally training, QPR training, etc.

Surgery: Students may observe surgeries at the approval of Ochsner/Lafayette General or Louisiana Orthopedic Specialists.

Research and Evidence-Based Practice: PDUs may involve exposure to research methodologies and evidence-based practices within the field of athletic training. Students may assist UL faculty with critically analyzing research literature, contributing to ongoing projects, or implement evidence-based approaches in their clinical work. Students may not use research-based events for their own capstone projects in this area.

Modeling: Serving as a model for undergraduate courses (ex, structural kinesiology) as well as MSAT graduate level courses (ex, second year students modeling for lower eval) may count as PDUs.

Professional Organizations: Involvement in professional organizations related to athletic training is encouraged as part of PDUs. Membership in organizations such as the National Athletic Trainers' Association (NATA) can provide students with access to resources, networking events, and professional development opportunities. Providing documentation of current NATA membership, SMA membership, or other relevant association memberships = 1 PDU each per semester.

Other: Students may propose an event for PDU approval. This proposal must be sent to the CEC within 7 days of the event for review and approval.

Students must have all PDUs completed by the last class day of the semester. In special circumstances, if an event is scheduled during finals week, students may request permission to extend the due date until after the event. This must be approved by the CEC at least 7 days prior to the last class day of the semester. PDUs for Fall 1 & 2 may be earned during the summer and applied to the fall form, but otherwise, no "rollover" of PDUs into other semesters.

Students will be provided a PDU form to document events along with any supporting documentation of attendance.

3.8 Immersive Experience Requirements

As a requirement for CAATE, students completing the MSAT Program at UL Lafayette will complete an immersive clinical experience during their final spring semester. Per CAATE Standard 16, students will complete an immersive experience that is practice-intensive so as to experience the totality of care provided by athletic trainers. Students must participate in the day to day and week to week role of an athletic trainer. Immersive clinical sites will be completed during their final spring semester unless otherwise discussed and approved by the CEC. Immersive experiences can be completed in any setting and in any location as long as the site and preceptor meet CAATE requirements and are approved by the CEC. When at their selected site, they must be with their preceptor while their preceptor is working.

AT students should adhere to the following guidelines:

- Students will be responsible for finding, contacting, and arranging their immersive clinical site during their second fall semester.
- Students will need to formally submit their prospective immersive clinical site to the MSAT faculty by no later than October 15 of the second fall semester.
- All potential preceptors must be approved by the MSAT faculty and under preceptor training prior to students beginning clinical hours.
- All preceptors must be currently certified or licensed athletic trainers and be willing to provide their BOC documentation, state licensure, and NPI documentation (when appropriate) as well as any additional documentation per CAATE 2020 Standards.
- All immersive clinical sites must agree to a minimum of 30 hours of clinical experience per week (average). As this is a true immersive experience, the student should prepare to be at their clinical site whenever their preceptor is.
- In the event that a student is unable to document a minimum of 30 hours (average) of clinical experience for any week during their 16-week experience, the student may need to find an additional clinical site to supplement the immersive experience.
- All immersive clinical sites must have a signed affiliated site agreement with UL Lafayette on file prior to the student beginning clinical hours as well as preceptors affiliated with that site should be preceptor trained.
- Students will have scheduled weekly check-ins with a member of the MSAT core faculty.

During a student's time at their immersive site, they are responsible for completing and/or collecting the following information: site emergency action plan and clinical site checklist. The clinical site checklist will be given to students by the CEC during their AT Immersion course.

3.9 Employment & Extracurriculars During Clinical Experiences

MSAT students should expect a considerable time commitment at each of their clinical site placements. Students are expected to follow the schedule determined by their preceptor at their assigned clinical site. It is the responsibility of the student to discuss the schedule with their preceptor prior to the official start of their clinical experience. Any outside employment and/or extracurricular schedules must not conflict with academic or clinical expectations or requirements.

It is heavily encouraged to not have outside employment during the immersive clinical experience. Students of the program cannot be affiliated with UL Lafayette athletics as athletes, graduate assistants, or coaches due to conflict of interest.

Students can be part of a club or recreational team but must do so outside of their clinical experiences and cannot practice as an athletic training student in that setting.

3.10 Travel During Clinical Experiences

MSAT students are to abide by the respective rules of their assigned sport when traveling on a road trip with their assigned clinical rotation. They should be ready to go if requested by a staff athletic trainer to accompany him/her on a trip. Athletic training students are to adhere to all travel regulations that apply to that team (i.e., dress code, appearance, departure times).

If an opportunity arises for a MSAT student to travel as part of their clinical experience, they should communicate with the Clinical Education Coordinator and MSAT faculty prior to the travel taking place. If the opportunity to travel will require the student to miss class, they are responsible for communicating with the professors and completing all materials for the classes they will miss if the absence is approved.

During travel for clinical experiences, students should report hours towards their clinical education hours if:

- The student is completing athletic training specific tasks under the supervision of a preceptor. This includes pre-practice, official practices, games, treatment times, mock injuries/scenarios.

Students should **not** report hours for the following:

- Bus/airplane/car travel time
- Leisure time at the hotel
- Team activities that do not include athletic training services (example, team meals)

Students should not travel with athletes unsupervised. For example, students should not ride a bus that their preceptor is not also on. Students should not independently transport athletes in their personal vehicles, even if for a medical related reason (example, taking an athlete to a doctor appointment). If preceptors are asking students to do this, they are to report it to the CEC.

3.11 CPR and AED Certification Requirements and Bloodborne Pathogens Training

Students formally admitted to the UL Lafayette MSAT Program must possess and maintain current CPR and AED certifications throughout their time in the UL Lafayette MSAT Program. If an AT student is not directly supervised, CPR and AED certifications allow the student to provide appropriate first responder care. Acceptable credentialing agencies are the National Safety Council, American Red Cross, and American Heart Association.

The UL Lafayette MSAT Program will offer the above courses on a limited basis. The UL Lafayette MSAT Program will make a concerted effort to provide students with advanced notification of upcoming CPR and AED courses to allow as many AT students as possible to attend. However, it is the AT student's responsibility to maintain current CPR and AED certifications. Students enrolled in clinical classes will be unable to attend clinical placement until the student has current CPR and AED certifications.

Students will be instructed in proper First Aid skills, Bloodborne Pathogens training, and OSHA guidelines in their Emergency Management course and be trained annually.

3.12 Liability Insurance for Clinical Experiences

The University of Louisiana System provides a blanket liability insurance policy for those students currently enrolled in a clinical experience class (KNES 551, 552, 553, 554). Again, this policy is only for those AT students enrolled in a clinical experience class and only while completing official clinical course hours for the clinical experience class. A certificate of liability insurance coverage is on file in the UL Lafayette MSAT Program's Clinical Education Coordinator's office and a copy can be provided to each company and school utilized by the program.

Students not officially completing clinical experience course hours are not covered under the terms of this insurance policy. AT students not enrolled in a clinical class or who are not officially logging hours for a clinical course fall under the terms and guidelines for providing service work which is not covered by the liability insurance policy.

Several insurance companies do provide reasonable liability insurance coverage for AT students, particularly when not meeting the coverage guidelines by the UL System. More information about this subject can be found on the NATA website or by contacting Healthcare Providers Service Organization (HPSO). There are two web links to HPSO:

<http://www.hpso.com> or

<http://www.hpso.com/students/stucovm3.php3?state=Louisiana&megaVersion=3>

3.13 CAATE Standards, Skills Checks, and Objective Structured Clinical Examinations

Each semester, students will be asked to complete a variety of real-time skills at their clinical site. Students should coordinate with their individual preceptors for these skills to be evaluated through the CAATE Standards and/or skills checks accessed via ATrack. Skills checks will assess a student's short term memory retention as these skills are being taught throughout the semester they are being assessed. These skills will be on a class basis. CAATE Standards are assessment tools that focus on a student's long term memory retention as they have learned the material in a previous semester. Soon after the experience, the student and preceptor should meet to debrief over the encounter and discuss a plan of action for future encounters. Students will need to turn in the CAATE Standards and/or skills checks by their due date within their course syllabus.

At the end of selected semesters, students will complete an Objective Structured Clinical Examination (OSCE). These assessments will evaluate students' ability to demonstrate athletic training skills and evaluate their knowledge retention of athletic training content over time. The OSCE is a "versatile multipurpose evaluative tool that can be utilized to assess health care professionals in a clinical setting. It assesses competency, based on objective testing through direct observation. It is precise, objective, and reproducible allowing uniform testing of students for a wide range of clinical skills." More information about what an OSCE is and the benefits of this type of assessment can be found [here](#).

3.14 Guidelines for Performing CAATE Standards, Skills Checks, and OSCEs

Preceptors should utilize ATrack to document completion of assigned CAATE Standards. Any additional clinical based skills check offs as assigned by course instructors should be completed as identified by the teacher. Preceptors should witness the real-time student/patient encounter and at the conclusion, promptly complete the assessment tool and provide written feedback (strengths and areas of improvement) for the student. In the absence of organic scenarios arising in the clinical site, mock scenarios, literature-based discussion about the topic, case scenarios, etc. may be used for the preceptor to evaluate the student's understanding and performance of the topic. After a debrief occurs where student and preceptor have discussed the Standard, the preceptor should mark it as either "evaluated, not passing" or "proficient" on ATrack. Students may make multiple attempts to demonstrate the Standard until a "proficient" score is earned. Any Standards marked "not evaluated" or "evaluated, not passing" will earn a zero for the Standard. It is the student's responsibility to complete the encounters outlined in specific courses

each semester, schedule times with preceptors to complete these tasks, debrief and document accordingly per their clinical course by the due date within the respective clinical course syllabus.

OSCEs

In order to be eligible to progress to the next clinical site, students must earn a passing OSCE score of 75% at the end of the first fall, 80% at the end of the first spring, and 85% at the end of the second fall. The first grade earned will be recorded as one of the grades in the students' clinical course for that semester. If a passing score is not achieved on the first attempt, a second attempt at a later date will be offered. If a passing score is earned on the second attempt, the student may progress to the next clinical site without any additional interventions; however, the new score will not replace the first score earned in the gradebook. If after two attempts, a student does not earn a passing score, they must meet with the AT faculty to discuss a remediation plan. The student must meet all requirements set forth in the remediation plan before attending their next clinical site. Any hours missed during remediation will need to be made up before the end of the semester unless otherwise stated. The remediation plan will be recorded in writing and signed by all relevant parties as a binding learning contract. Failure to meet the requirements of the remediation plan will delay/forfeit clinical site attendance, and thus, a student may be at risk for failing their clinical course. If there is a failure of the clinical course, the student will be recommended to the Dean of the Graduate School for dismissal from the MSAT Program and the Graduate School (please see section 2.16 for more information about the dismissal process).

3.15 Clinical Site Dress Code

Clothing and appearance during clinical experiences should project a professional image. AT students are required to wear black, gray, or khaki shorts or slacks and an approved shirt. An approved shirt includes an Athletic Training Program T-shirt on non-game days and an Athletic Training Program Polo shirt on game days. Shorts must be at least 1 inch past the fingertips when hands are at the sides and shoulders relaxed (a minimum of a 5-inch inseam). Khaki pants should be a relaxed and comfortable fit, making it possible to move around and work. No hats are to be worn inside during a clinical rotation. A UL Lafayette hat or one displaying the affiliated sites logo may be worn outside of a building, if deemed acceptable by the preceptor. In some sports, it is customary to wear business casual attire (slacks and a collared shirt) when obtaining clinical experience hours on game days. Any other specific attire requirement, such as covering tattoos or removal of piercings, will be up to the discretion of the preceptor. Otherwise, the students are expected to dress appropriately according to UL Lafayette student handbook guidelines:

- No cutoffs, skirts, or dresses.
- No tank tops, sleeveless/collarless shirts/blouses
- V-neck shirts/blouses are allowed, but must not be revealing
- All shirts/blouses must be tucked into slacks/shorts.
- No clothing from other colleges/universities, or clothing that has any unacceptable graphic/language/connotations.
- Meet all OSHA required guidelines (ex. no open toe shoes)

It is the student's responsibility to wear approved clothing (AT Program shirts and other attire that met the guidelines) during assigned clinical rotation hours. The preceptor has the discretion to ask the student to leave an observation and change from clothing that is deemed unacceptable.

The AT students should also be prepared with appropriate clothing and apparel in the event of inclement weather. If the weather is deemed safe for practice and play, the AT student should continue with the clinical experience hours.

All MSAT Program members will be provided with a nametag to be worn in all clinical education experiences. AT students will not be allowed to participate in clinical education experiences without an AT Program issued nametag. Replacement nametags will be available to students for \$10.00.

3.16 Cell Phone Policy

When students are at their clinical sites, they should be engaged, involved, and gaining quality clinical hours. Their cell phone should be on silent or vibrate and not be used when at their clinical site. Talking, texting, using the internet, taking pictures/videos of student athletes, etc. is not acceptable behavior. The student's cell phone should be used solely to initiate emergency response. If students abuse this policy, preceptors are allowed to excuse the student from the site; they should also inform the CEC of this issue. If the student has extenuating circumstances, they should speak with their preceptor prior.

3.17 Athletic Training Student Relationships

The AT student comes in contact with other members of the Athletic Department and the public quite often. It is helpful to know the limits of this contact in order that some unfortunate circumstances can be avoided. The following are brief guidelines to use in dealing with others during your assigned activities.

Athletic Training Students to Faculty and Staff Athletic Trainers: The Staff Athletic Trainer is the ultimate authority in the athletic training facility. The staff athletic trainers' orders/requests are to be carried out as promptly as possible and not to be passed to subordinates. It is perfectly acceptable to ask questions of a staff athletic trainer about anything pertinent. Ask, do not challenge, in front of patients/athletes. If there are any grievances, they are to be directed to the Staff Athletic Trainer, Head Athletic Trainer, or Director of Athletic Training and Sports Medicine where the appropriate course of action will be decided upon. The Graduate Assistant Athletic Trainers are members of the staff.

Athletic Training Students to Team Physicians: The medical director or team physicians are the ultimate medical authority at the University. Always follow the physician's directions explicitly. Whenever you are accompanying a student athlete to an on-site visit with a physician, always accompany the student athlete into the examination, be attentive, and be able to inform the athletic training staff on the status of the student athlete or their injury. Remember, these physicians are extremely busy, they may run behind schedule or seem abrupt at times, but they are vital to the performance of our jobs and should be always treated with respect.

Athletic Training Students to Athletic Director: The Athletic Director has the ultimate responsibility for all aspects of the athletic program and reports directly to the University president. If the Athletic Director asks you a question about an athlete or their injury, refer the Athletic Director to the staff athletic trainer.

Athletic Training Students to Coaches: The Head Athletic Trainer is ultimately responsible for reporting injuries or the status of student athletes to the respective coach. If a coach asks you a question about an athlete or their injury, answer it to the best of your knowledge, do not speculate. If a question remains, refer the coach to the staff athletic trainer. Adhere to the coach's rules as though you were a member of the team; avoid giving the appearance of having special privileges.

Athletic Training Students to Athletes/Patients: Treat each athlete the same, with respect. Do not discuss an athlete's injury with another athlete or friend. Refer the athlete to a staff athletic trainer if he/she has a question that you cannot answer. Do not speculate. Avoid close personal relationships with athletes; it could put you in a compromising situation. If any problems arise with an athlete, refer the problem to a staff athletic trainer or the athlete's coach. Do not provide an alibi for athletes. Do not issue special favors.

Athletic Training Student to Athletic Training Student: Treat one another with respect and with a professional attitude. Share the work as assigned and always do your part. Be fair with those students under you. Be constructive in your criticism and helpful in your comments. Refer confrontations and problems to a staff athletic trainer. Always attempt to challenge each other to grow in skill and knowledge attainment.

Athletic Training Student to the Public and Media: Present yourself with conduct and manner becoming to an allied health care professional. Be courteous. Refrain from arguments regarding athletes, athletics, coaches, or teams. Do not be the "inside source" for your friends or the media. Remember that you signed a Confidentiality Statement. Avoid making statements concerning the status of an injured athlete; refer them to one of the staff athletic trainers.

3.18 Amorous Relationship Policy

Being an athletic training student is a great opportunity for you to grow as a clinician and future professional. As an AT student you are learning many things that will prepare you for your future. Be aware of your actions and interactions and how they are portraying you as a professional. Make sure that nothing personally or professionally compromises your ability to practice athletic training. In addition, the NATA Code of Ethics states, "Members should conduct themselves personally and professionally in a manner that does not compromise their professional responsibilities or the practice of athletic training".

With this in mind, UL MSAT prohibits any amorous relationship between the Athletic Training Student and the following individuals: Student-Athletes, Coaching Professional Staff Members, and/or preceptors until you graduate from the program, not just move on to another clinical site/course. These relationships are problematic regardless of whether the Professional Staff Member (coach/preceptor) has supervisory control or authority over the Athletic Training Student. Amorous Relationship is defined as any sexual, romantic, or dating relationship, not including marriage (or civil union relationships) or domestic partnerships.

Students are expected to adhere to any additional requirements set forth by UL policies. Please note, UL policy updates to amorous relationships may happen outside of the annual MSAT handbook review, however, students will be held to any revised standards regardless of timing of updates.

3.19 Legal Matters

Students may face the possibility of dismissal from UL's MSAT Program based on legal matters. We recognize that legal matters can arise unexpectedly and impact individuals' academic pursuits. Therefore, it is crucial for all students to understand the potential consequences of engaging in activities that are contrary to the law and the values upheld by our program/institution.

In the event that a student becomes involved in a legal issue of any kind, students are required to notify the Program Director within 48 hours of the arrest or notice of charges filed to determine if it is safe for the student to remain in the classroom and/or clinical settings while the matter is resolved. This decision will be made between the Program Director and Clinical Education Coordinator. Any clinical hours or classes missed as a result of these legal matters will need to be completed in order to remain in good standing with the program. How and when these hours will be made up is at the discretion of the Clinical Education Coordinator and/or instructor of the course(s).

The decision to dismiss a student from the program will be made with careful consideration at the discretion of the Program Director, taking into account the severity and nature of the legal matter, as well as its impact on the overall welfare and reputation of UL Lafayette.

Dismissal from the program may occur if a student's involvement in a legal matter is found to be in violation of our code of conduct, policies, or local laws. The decision will be made in accordance with established disciplinary procedures and with utmost fairness and respect for due process.

We understand that facing legal challenges can be a distressing experience for any student, and we remain committed to providing appropriate support and guidance throughout the process when warranted. Students who find themselves in such circumstances are encouraged to seek assistance from designated support services, such as academic advisors, counseling centers, or legal resources, to better navigate the situation.

It is the responsibility of every student to familiarize themselves with our code of conduct, policies, and legal obligations. By doing so, students can actively contribute to maintaining a safe, inclusive, and law-abiding

environment within the UL community. We strongly believe in fostering personal growth, academic excellence, and ethical behavior, and by upholding these principles, we can collectively create a positive and enriching learning community for all.

3.20 Disciplinary Actions

A student violating the NATA Code of Ethics, Louisiana Athletic Training Law, UL Lafayette Code of Student Conduct, Confidentiality of Medical Information, any other policies detailed in this policies and procedure handbook, or any grievances severe enough to warrant disciplinary action conversation among AT faculty not previously outlined in the aforementioned documents, may be subject to disciplinary action from the MSAT Program.

Initial disciplinary action can include, but is not limited to, any of the following:

- Issuance a grade of zero for the assignment during which the offense occurred if it is an academic offense.
- Point deductions from the clinical course that align with the severity of the infraction.
- Formal warning and counseling by an MSAT Program faculty member.
- Incident Documentation form and counseling by preceptor.
- Dismissal from the program

Secondary disciplinary action will result in a formal probationary period and can include any of the following:

- Any offense of a student who has been formally warned and counseled by an MSAT Program faculty member.
- Initial incident documentation form and counseling by MSAT Program faculty member or preceptor if warranted by the situation.
- Any subsequent incident documentation forms and counseling by MSAT Program
- Dismissal from the program based on the magnitude of the offense.

Secondary disciplinary action or a major first offense can include, but is not limited to, any of the following:

- Issuance of a C in the course in which the infraction occurred resulting in the need to repeat the clinical course
- Immediate removal of the student from the clinical site (if a student is removed for disciplinary action, there is no guarantee the student will be placed at a new clinical site)
- Dismissal from the program

Ultimately, appropriate disciplinary actions will be at the discretion of the Program Director and Clinical Education Coordinator. Students reserve the right to appeal any decisions made by program administration.

3.21 Communicable Disease Policy

DEFINED: a disease that may be transmitted directly or indirectly from one individual to another.

The UL Lafayette MSAT Program wishes to ensure a healthy and safe environment for all students, faculty members, preceptors, and their respective patients/athletes. Therefore, in the event that an MSAT Program student contracts a communicable disease that could jeopardize other students, faculty, preceptor, and/or patients/athletes, the MSAT Program student should:

1. Seek immediate medical attention for formal evaluation. Also, inform the attending physician that you are a student in an Allied Health Program and discuss if you should be restricted from interaction at clinical sites or with other students.
2. The student should have written documentation from the attending physician in regard to their ability to continue with classes and clinical rotations or if any restrictions are required.

3. The student should contact their respective instructor or the MSAT Program Director and/or the Clinical Education Coordinator immediately following evaluation and consultation with a physician to discuss the MSAT Program student's status.

4. In the event of prolonged illness from communicable disease, the MSAT Program student should be in contact with the UL Lafayette Dean of Students to appropriately document and remediate the situation, as per the UL Lafayette Code of Student Conduct.

As long as a MSAT Program student is deemed to be contagious by a physician, that student will not be allowed to attend clinical rotations. By the student contacting their instructor or the MSAT Program Director promptly, appropriate remediation will be allowed to the student. In the event there is a prolonged communicable illness, and the student cannot finish the required clinical experience hours or required coursework, a grade of "I" (incomplete) will be granted, and the student will be allowed to make-up the work in the following Fall or Spring semester.

Further University Wide Information on Communicable disease may be accessed at:

<http://safety.louisiana.edu/Policy/seventh%20edition/Sec12%20BBP%20and%20other%20communicable%20illnesses%207th%20ed.pdf>

The MSAT Program will follow the CDC's guidelines as well as UL Lafayette's policies on the COVID-19 disease. While at clinical sites, students must follow the site's policies on COVID-19. As per UL Lafayette standards, students are required to receive all doses of the COVID-19 immunization shots unless they fill out an exemption from immunizations declaration. If a student chooses to fill out an exemption, their clinical experience opportunities may be limited due to the site's vaccination policies. If a student contracts COVID-19 or is exposed to a positive case, they are to report it to UL Lafayette's Student Affairs (https://studentaffairs.louisiana.edu/dean-students/students/students-report-anticipated-or-unplanned-absence?utm_source=delivra&utm_medium=email&utm_campaign=Dean%20of%20Students%20Fall%202021%20Comms&utm_id=3103778&dlv-emuid=7c55d650-1e54-457b-8adf-f2f93de50a5a&dlv-mlid=3103778) and are to follow the university's policies on quarantining.

The UL Graduate School requires vaccination records for all enrolled students. Form can be found [here](#). Although COVID-19 vaccinations are not required for UL admissions, it is highly recommended that students become vaccinated as certain clinical sites mandate it.

3.22 OSHA Bloodborne Pathogens Training Requirements

The MSAT students are required to obtain approved training in OSHA Bloodborne Pathogens. Students are required to maintain bloodborne pathogens training, which to be administered in KNES 516 and KNES 545. They will sign an acknowledgement of training at the end of their course.

Additional opportunities for bloodborne pathogen training are available through the UL Lafayette Safety Department. For more information on the UL Lafayette Department of Health and Safety training courses, please contact:

Joey Pons, IV, Director Parker Hall
P.O. Box 43210 Lafayette, LA 70504-3210
Phone: 337/482-5357
E-mail: safetyman@louisiana.edu

Or go to the UL Department of Health and Safety Web Page, scroll down towards the bottom of the page, and click on "Safety Training" for a list of current courses being administered:

<http://safety.louisiana.edu/Training/index.shtml>

To reduce the risk of bloodborne pathogen exposure, students are to follow the CDC guidelines, use the safety measures taught in their Bloodborne pathogens training, and wash their hands (Appendix D). However, if a student believes they have been exposed to a bloodborne pathogen, they are to report the incident to their preceptor (if at their clinical site) and Program Director.

3.23 Inclement Weather Policy

The UL Lafayette MSAT Program urges caution to the MSAT students and preceptors in the event of inclement weather. These conditions include, but are not limited to, lightning, tornadic activity, hurricane, hail, and rising/moving flood waters. In the event such unsafe conditions present themselves, seek appropriate shelter immediately.

In the event inclement weather forces the closure of the University, the MSAT student is not required to report to clinical rotations until such time as the University officially re-opens.

3.24 Therapeutic Modality Calibration

UL Lafayette MSAT Program will ensure that all therapeutic modalities are calibrated, and safety checked on an annual basis. All clinical education sites will undergo annual review from Program Administrators to ensure therapeutic modalities which students have access to are calibrated and safety checked. Students will not be permitted to attend sites with outstanding safety checks and/or calibrations.

3.25 Mandatory Reporting

As a member of the UL MSAT program, you are a mandatory reporter. Therefore, it is your duty to report any suspected or confirmed violations of the MSAT handbook or legal infractions to either an MSAT faculty member or the KNES Department Director immediately. Additionally, it is your responsibility to report any breaches of the law or ethical behavior while at your clinical sites to your preceptor immediately. This can include, but is not limited to, instances of self-harm, abuse, sexual assault, inappropriate relationships, suicidal ideations, drug or alcohol misuse. Failure to report will result in associated discipline ranging from academic probation to dismissal from the program as determined by the MSAT faculty and the KNES Department Director.

Chapter 4: MSAT Program Forms

UL Lafayette MSAT Policies and Procedures Manual Acknowledgement Form

As a Master of Science in Athletic Training Student at UL Lafayette and by signing this agreement and returning it to the Athletic Training Faculty, I acknowledge that I have received a copy of the Policies and Procedures Manual, and that I hereby fully accept responsibility for hereafter knowing its contents and abiding by the policies described within including any updates or modifications of the manual as they may be provided to me from time to time. I acknowledge and agree that I will be held to the performance standards commensurate with the level of athletic training knowledge that I have received. I understand and agree that it is my responsibility to always know my strengths and limitations and act accordingly.

I understand that I am not to travel and perform athletic training services unless I am under direct supervision of a Certified Athletic Trainer who is a Preceptor associated with the UL Lafayette Master of Science in Athletic Training Program (unless otherwise approved by the Program Director and Clinical Education Coordinator). I agree to always act professionally and represent the University and the Athletic Training Program with respect and dignity. I understand that a breach of this agreement is subject to disciplinary action within the MSAT Program and the university. It is my responsibility to seek help and guidance from the supervising healthcare provider before performing duties I am not licensed to perform.

Please read and initial each clarifying statement below.

-- _____ I acknowledge the existence of a Blood Borne Pathogen Policy and will abide by its regulations.

_____ I acknowledge the existence of the technical standards and feel I can appropriately meet them.

_____ I acknowledge the existence of a communicable disease and immunization policy which I agree to abide by.

_____ I know where to find the manual should I have questions and need to use it as a reference.

_____ I acknowledge the existence of HIPPA and FERPA policies in place and will maintain confidentiality in all situations that fall under those policies.

_____ I acknowledge that some clinical sites require additional screenings, paperwork, etc. for clearance to attend and I will comply with those requirements when they arise.

_____ I understand that the disciplinary actions associated with the violation of any handbook policies (e.g. MSAT Program discipline, UL Lafayette Dean of Students, etc.) and agree to abide by the actions deemed necessary by a UL school official.

Student Name Printed: _____ Date: _____

Student Signature: _____

Program Director Signature: _____

UL Lafayette MSAT Technical Standards Form

The Master of Science in Athletic Training Program at the University of Louisiana at Lafayette is a rigorous and intense program that places specific requirements and demands on the students enrolled in the program. An objective of this program is to prepare graduates to enter a variety of employment settings and to render care to a wide spectrum of individuals engaged in physical activity. The technical standards set forth by the Master of Science in Athletic Training Program establish the essential qualities considered necessary for students admitted to this program to achieve the knowledge, skills, and competencies of an entry-level athletic trainer, as well as meet the expectations of the program's accrediting agency (Commission on Accreditation of Athletic Training Education [CAATE]). The following abilities and expectations must be met by all students admitted to the Master of Science in Athletic Training Program. In the event a student is unable to fulfill these technical standards, with or without reasonable accommodation, the student will not be admitted into the program.

Compliance with the program's technical standards does not guarantee a student's eligibility for the BOC certification exam.

Candidates for selection to the Master of Science in Athletic Training Program must demonstrate:

1. The mental capacity to assimilate, analyze, synthesize, integrate concepts and problem solve to formulate assessment and therapeutic judgments and to be able to distinguish deviations from the norm.
2. Sufficient postural and neuromuscular control, sensory function, strength, and coordination to perform appropriate physical examinations and demands of the profession using accepted techniques; and accurately, safely, and efficiently use equipment and materials during the assessment and treatment of patients.
3. The ability to communicate effectively and sensitively with patients and colleagues, including individuals from different cultural and social backgrounds; this includes, but is not limited to, the ability to establish rapport with patients and communicate judgements and treatment information effectively. Students must be able to understand and speak the English language at a level consistent with competent professional practice.
4. The ability to record the physical examination results and a treatment plan clearly and accurately.
5. The capacity to maintain composure and continue to function well during periods of high stress.
6. The perseverance, diligence, and commitment to complete the athletic training education program as outlined and sequenced.
7. Flexibility and the ability to adjust to changing situations and uncertainty in clinical situations.
8. Affective skills and appropriate demeanor and rapport that relate to professional education and quality patient care.

Candidates will be required to verify they understand and meet these technical standards or that they believe that, with certain accommodations, they can meet the standards.

Admitted students will complete a PAR-Q+ and/or a similar health questionnaire to accompany the technical standards form. These forms will only be used for identifying any necessary supports for reasonable accommodations in accordance with this document.

The UL Lafayette Services for Students with Disabilities Department will evaluate a student who states they could meet the program's technical standards with accommodation and confirm that the stated condition qualifies as a disability under applicable laws.

If a student states they can meet the technical standards with accommodation, then the University will determine whether it agrees that the student can meet the technical standards with reasonable accommodation; this includes a review a whether the accommodations requested are reasonable, taking into account whether accommodation would jeopardize clinician/patient safety, or the educational process of the

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student or the institution, including all coursework, clinical experiences and internships deemed essential to graduation.

Please check only one of the following statements, then sign and date. I certify that I have read and understand the technical standards for selection listed above, and I believe to the best of my knowledge that:

[] I meet each of these standards without accommodation. I understand that if I am unable to meet these standards I will not be admitted into the program.

Student Signature _____ Date _____

Alternative statement for students requesting accommodations.

[] I can meet each of these standards with certain accommodations. I will contact the UL Lafayette Services for Students with Disabilities Department to determine what accommodations may be available. I understand that if I am unable to meet these standards with or without accommodations, I will not be admitted into the program.

Student Signature _____ Date _____

UL Lafayette MSAT Clinical Education Code of Conduct Contract

Purpose: to state the standards of appropriate behavior that should be followed by all athletic training students during clinical experiences while representing the University of Louisiana at Lafayette Athletic Training Program. The primary intent of this contract is to establish a high level of professionalism for athletic training students.

Standard I

All athletic training students are expected to establish a weekly clinical schedule with their Preceptor in writing. It is the responsibility of the student to keep their Preceptor informed if they are not able to attend any previously scheduled athletic activities and arrange another time to make up the hours. This standard is intended to assure the student is viewed as reliable, consistent, and considerate of his or her Preceptor and the other staff involved with that clinical site.

Standard II

All athletic training students are expected to not engage in any social interactions or relationships with persons (i.e. a person who is directly related to athletic or educational aspects of clinical education, such as athletes, coaches, team volunteers, other AT students assigned to the location, etc.) that may be interpreted as a conflict of interest or unprofessional behavior. It is the responsibility of the student to display ethical conduct when representing the profession of athletic training and the university. This standard is intended to assure the student is viewed as a pre-professional dedicated to upholding the integrity of clinical education.

Standard III

All athletic training students are expected to refrain from divulging any personal information regarding, athletes, other clinical students, clinical supervisors, and/or affiliated faculty and staff while completing clinical experiences. The purpose of a clinical rotation is to learn and engage in educational experience. It is imperative that all clinical students separate personal experiences from clinical experiences. Although the athletes may be your peers you must still uphold HIPPA regulations. This standard is intended to assure the student is using the utmost discretion when discussing any personal and medical information during all educational experiences.

I _____, understand and agree to abide by the above-mentioned standards in regards to all clinical educational experiences. I understand if I violate any of the above mentioned standards, I will be subject to disciplinary action outline in the program student policy and procedures manual.

Student Signature _____ Date _____

Guidelines for Clinical/Field Experience Form

The following guidelines delineate the role of an athletic training student. As a student in the UL Lafayette MSAT Program, you are expected to conduct yourself in accordance with these guidelines during any clinical experience.

- *Supervision (Clinical Experience):* Supervision is defined as a clinical experience that involves a preceptor being onsite and has the ability to intervene on behalf of the athletic training student and the patient. Clinical experiences must be supervised by a preceptor; preceptors must be an athletic trainer or a physician. Supervision must occur in compliance with Louisiana's state practice act (or the state that the student completes their immersive experience in).
- *Supplemental Clinical Experience:* These experiences are, also, learning opportunities that are supervised by healthcare providers other than athletic trainers or physicians or clinical opportunities approved by the Program Director and Clinical Education Coordinator (i.e. PDUs). These opportunities do not count toward traditional clinical experiences (per CAATE 2020 Standards) but can count as additional clinical experience hours.
- *Unsupervised (First Responder):* Any clinical experience in which the AT student is acting without the presence of a preceptor, ATC, LAT, or other allied health care professional.

SUPERVISED CLINICAL EXPERIENCES OR SUPPLEMENTAL CLINICAL EXPERIENCES:

The following guidelines delineate the role of a Master of Science in Athletic Training student. As a student in the UL Lafayette MSAT Program, you are expected to conduct yourself in accordance with these guidelines during any clinical experience.

A MSAT student acting under the supervision of a preceptor, athletic trainer, physician, or other approved allied healthcare professional may complete the following:

- Provide all athletic training services that have been presented within a previous or concurrent academic course and/or successfully evaluated for proficiency in clinical skills.
- Write documentation recording actions of care

MSAT students should provide care that is in accordance with the NATA Code of Ethics as well as LSBME State Practice Act for Athletic Trainers (specific to athletic training students). The MSAT student's supervisor is expected to give feedback and debrief students with clinical skills, documentation, academic knowledge, and soft skills in order for students to learn quality patient care. MSAT students that are being supervised are covered under the university's student liability insurance. Students should wear their name badges while at their clinical sites so that they can be identified as students; when introducing themselves, they should identify themselves as students prior to care.

ATHLETIC TRAINING STUDENT CREDENTIAL REQUIREMENTS:

A student must maintain current certifications in Basic Life Support (BLS) CPR by the American Red Cross or American Heart Association throughout their time in the MSAT Program. First Aid techniques and bloodborne pathogens training will be provided to the student in their first summer semester. This will allow students to provide lifesaving services to any individual regardless of the presence of a supervising preceptor or healthcare provider. If a student must use these skills, they are to report them to their Clinical Education Coordinator and document the incident.

CLINICAL EXPERIENCE HOURS:

Athletic training students must complete their minimum number of clinical hours per clinical experience course they are enrolled in. Specific guidelines and disciplinary actions for not acquiring these hours are included in section 3.7. Hours should be logged in the ATrack software system; the student is responsible for documenting their hours within 3 days of acquiring them. It is the responsibility of the student to record their hours, not their preceptor. The CEC will manually input 1 day of hours per semester if the student forgets to log those hours, but beyond that 1 afforded exception, hours spent at clinical but were not logged will not count toward the total. Clinical hours must be initialed by the students' preceptor by each hours checkpoint date (refer to clinical course syllabi for these dates). If a student is asked to travel with their team, they must complete this under their preceptor's supervision. Specific guidelines for travel are included in section 3.4.

STUDENT LIABILITY INSURANCE:

Students in the MSAT Program are covered under the university's student liability insurance as long as they are being supervised by a program approved healthcare professional. If they are unsupervised or administering unacceptable services, this insurance policy does not apply.

I have read and understood the guidelines for clinical experience and field experience.

Student signature: _____

Date: _____

Guidelines for Service Work

The purpose of this policy is to assist you in understanding the process by which you may perform service work that may be related to your athletic training education clinical experiences. The following statements serve to assist you in understanding the difference between your commitment to any service work and your commitment to your academic clinical experience requirements.

1. The purpose of UL Lafayette Sports Medicine Association is to promote the involvement of Kinesiology students with their state, regional, and national organizations. The organization also offers the opportunity to enhance relationships between students and faculty in the Department of Kinesiology. Your involvement in this organization is completely voluntary and any activity that you perform with this organization is counted as a service to UL Lafayette Sports Medicine Association and in no way is required as part of your grade within your academic clinical experiences.
2. You may volunteer for any service work (athletics, intramurals, UCA summer camps, etc.) related to your clinical education experiences while completing or after completion of the necessary academic and clinical requirements. The academic program encourages you to pursue these opportunities to broaden your experiences as long as they do not interfere with academic expectations nor your assigned clinical requirements. Some service opportunities may be used toward PDU requirements (please confirm with CEC).

If you perform such service work, it is recommended that you understand certain issues related to this experience. It is recommended that you should:

1. seek to clarify your specific role with the agency (i.e. first responder).
2. ask for a written description of their expectations and sign it stating that you understand what is expected.
3. be able to identify and have clear communications with your direct supervisor during your assignments.
4. Clarify what liability coverage is provided by the department or agency and be informed of your need to possibly seek your own personal liability coverage. **The personal liability insurance provided by the University will only cover you during academic clinical experiences.**

It is your responsibility and the department or agency that you are performing the service work for (voluntary or compulsory) to seek an adequate resolution to these issues.

UL Lafayette MSAT Program encourages you to take every opportunity to gain valuable experiences in settings that would enhance your pursuit to become a certified athletic trainer. The Athletic Training Program will assist you in tracking these experiences by filing your logged hours and placing them in your ATrack hours under a site titled "Professional Experiences". **These hours do NOT count toward Academic Clinical Experience hours.** You are encouraged to get a letter of recommendation from your supervisor(s) after your assignment is completed.

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I understand the difference between the academic standards required of me as stated in Chapter 3 and any other service work that I might perform related to my Athletic Training Education clinical experiences.

Student Signature _____ Date _____

Hepatitis B Verification Form

During my Athletic Training Clinical experiences at the University of Louisiana at Lafayette (and related off-campus clinical sites), I acknowledge and understand that I may be exposed to blood, blood-borne pathogens, and other potentially infectious materials. I understand that this exposure may put me at risk for acquiring the Hepatitis B virus (HBV) infection. I understand that there is a Hepatitis B vaccination series available at the health department or from my primary care physician. I understand and acknowledge that it is my responsibility to obtain and pay for the vaccination series if I chose to do so. I further acknowledge by my signature and by checking the options below that I have read and understand the Hepatitis B Fact Sheet (Appendix E).

Please select one:

_____ 1. I have read the Hepatitis B fact sheet and in deciding not to obtain the Hepatitis B vaccination series, I understand that I may be at risk for acquiring the Hepatitis B virus (HBV) infection, which is a serious disease. I understand that above information and decline to obtain the Hepatitis B series.

_____ 2. I have read the Hepatitis B Fact Sheet and I have received my initial or second Hepatitis B vaccination. Documentation from my primary care physician can be provide upon request with vaccination dates.

_____ 3. I have read the Hepatitis B fact sheet and I have received the entire Hepatitis B Vaccination series prior to beginning the Master of Science in Athletic Training Program at the University of Louisiana at Lafayette. Documentation from my primary care physician can be provide upon request with vaccination dates.

Student Signature: _____

Date: _____

COVID-19 Verification Form

During my Athletic Training Clinical experiences at the University of Louisiana at Lafayette (and related off-campus clinical sites), I acknowledge and understand that I may be exposed to blood, blood-borne pathogens, and other potentially infectious materials. I understand that this exposure may put me at risk for acquiring the COVID-19 infection. I understand that there is a COVID-19 vaccination available at the health department or from my primary care physician. I understand and acknowledge that it is my responsibility to obtain and pay for the vaccination series if I chose to do so. I further acknowledge by my signature and by checking the options below that I have read and understand the COVID-19 fact sheet ([https://www.who.int/news-room/fact-sheets/detail/coronavirus-disease-\(covid-19\)](https://www.who.int/news-room/fact-sheets/detail/coronavirus-disease-(covid-19))).

Please select one:

_____ 1. I have read the COVID-19 fact sheet and in deciding not to obtain this vaccination, I understand that I may be at risk for acquiring the COVID-19 infection, which is a serious disease. I, also, acknowledge that without this vaccination, I may not be able to have certain clinical experience due to their vaccination policies. I understand that above information and decline to obtain the COVID-19 vaccination.

_____ 2. I have read the COVID-19 fact sheet and I have received a COVID-19 vaccination prior to beginning the Master of Science in Athletic Training Program at the University of Louisiana at Lafayette. Documentation from my primary care physician can be provide upon request with vaccination dates.

Student Signature: _____

Date: _____

Appendix A: Pre-Requisite Courses

Pre-Requisite Courses	Credit Hours	UL Equivalent
First Aid & CPR (if the applicant does not possess current certifications)	4 credits	HLTH 100 & 101
Fundamentals of Biology I with lab	4 credits	Biology 110 & 112
Survey of Human Anatomy and Physiology I & II with labs	8 credits	BIOL 220 & 221, BIOL 318
General Chemistry	3 credits	CHEM 107
General Physics	3 credits	PHYS 207
Elementary Statistics	3 credits	STAT 214 or KNES 400
Introduction to Psychology or Sports Psychology	3 credits	PSYC 110 or KNES 443
Medical Terminology	3 credits	HIM 361
Basic Human Nutrition or Sports Nutrition	3 credits	DIET 200 or HLTH 405
Exercise Physiology	3 credits	KNES 303
Biomechanics or Structural Kinesiology	3 credits	KNES 415 or KNES 320

Appendix B: Incident Document Form



Master of Science in Athletic Training Program

Incident Document Form

Name of Person/People Involved:

Incident Information

Date/Time/Location: Description:

Were there witnesses? Yes No Unknown

Witnesses Names:

Has this behavior occurred before? Yes No Unknown

If you would like to meet with AT Program faculty regarding this incident, please provide your name.

To be completed by the AT Faculty

Violation of MSAT Program P&P Manual or Preceptor/Faculty Handbook? Yes No

Specific Policy: _____

Signature: _____ Date _____

Appendix C: Learning Contract

University of Louisiana at Lafayette Master of Science in Athletic Training Program
Clinical Education – Learning Contract
(complete during initial meeting with preceptor)

Student Name: _____

Preceptor Name: _____

Clinical Site Location: _____ Fall/Spring Year: _____

To be completed by the student: Goals can include professional development, clinical skill opportunities, exposure to specific modalities or therapy techniques, or evaluation opportunities.

Initial Goals for the semester:

- 1.

- 2.

- 3.

Clinical Site Orientation: Students are encouraged to meet with their assigned preceptor to discuss the following items:

- Dress code
- Student’s class schedule
- Travel opportunities
- Parking permits (if needed)
- Site specific policies and procedures (bloodborne pathogens plan, communicable disease plan, HIPAA/FERPA, injury/treatment documentation, vaccination)
- Emergency action plan
- Clinical education requirements (evaluations, hour requirements, goals, skills sheets, clinical integration scenarios)

By signing below you certify that both parties have discussed the above items.

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Professional MSAT Student Signature: _____

Preceptor Signature: _____

Hand Hygiene at Work

Accessible link: <https://www.cdc.gov/handwashing/handwashing-corporate.html>



Hand hygiene is an easy, affordable, and effective way to prevent the spread of germs and keep employees healthy. Promoting clean hands within your workforce—whether your employees work in a classroom, in a retail store, in an office, at home, or in any other setting—can improve the health of your employees, customers, workplace, and even your community.

Hand Hygiene Benefits Everyone's Health

Germs can spread quickly. Hand hygiene is one of the best ways to prevent employees from getting sick and spreading germs to others in the workplace. Sick employees are less productive even when they come to work, and they can spread their illness to others. Promoting clean hands in the workplace can also result in employees using fewer sick days.

Employees who make hand hygiene part of their routine also prevent spreading illness to their families at home and set an example for their loved ones to follow. Employees with healthy family members spend less time away from work taking care of their sick loved ones.



Good hand hygiene means regularly washing hands with soap and water for at least 20 seconds, and then drying them. It can also mean using an alcohol-based hand sanitizer with at least 60% alcohol if soap and water are not readily available.

www.cdc.gov/handwashing



CS324123-A

Handwashing Benefits the Entire Community

- Reduces respiratory illnesses, like colds, by 21%
- Reduces the number of people who get sick with diarrhea by 31%
- Reduces diarrheal illness in people with weakened immune systems by 58%

Key Times for Hand Hygiene

Tell employees that if their hands are visibly dirty, they should use soap and water instead of hand sanitizer. Key times for employees to clean their hands include:

- Before and after work
- Before and after breaks
- After blowing their nose, coughing, or sneezing
- After using the restroom
- Before eating or preparing food

Tips for Protecting Employee Health

Increase access to sinks that is accessible to all employees and in places such as bathrooms, food preparation areas, or in eating areas.

- Provide soap, water, and a way to dry hands (e.g. paper towels, hand dryer) so employees can wash and dry hands properly.
- Place hand sanitizer dispensers with at least 60% alcohol near frequently touched surfaces, in areas where soap and water are not easily accessible, such as near elevators, shared equipment, building entrances and exits, etc.
- Put visual reminders, like signs or posters, in bathrooms or kitchen areas to remind employees to wash their hands.
- Provide other hygiene supplies such as tissues and no-touch/foot pedal trash cans.
- Promote and model other healthy habits, such as covering coughs and sneezes, then washing hands.
- Clean frequently touched surfaces, such as countertops, handrails, and doorknobs regularly.
- Tell sick employees to stay home until they are symptom-free.
- Remind employees to practice and model good hand hygiene at home.



Hand hygiene can lower the chances of spreading illnesses to others when you shake hands or touch common surfaces and objects, such as tables and doorknobs.

HEPATITIS B

General Information

What is hepatitis?

"Hepatitis" means inflammation of the liver. The liver is a vital organ that processes nutrients, filters the blood, and fights infections. When the liver is inflamed or damaged, its function can be affected. Heavy alcohol use, toxins, some medications, and certain medical conditions can cause hepatitis. However, hepatitis is most often caused by a virus. In the United States, the most common types of viral hepatitis are Hepatitis A, Hepatitis B, and Hepatitis C.



The only way to know if you have Hepatitis B is to get tested.

What is Hepatitis B?

Hepatitis B can be a serious liver disease that results from infection with the Hepatitis B virus. **Acute Hepatitis B** refers to a short-term infection that occurs within the first 6 months after someone is infected with the virus. The infection can range in severity from a mild illness with few or no symptoms to a serious condition requiring hospitalization. Some people, especially adults, are able to clear, or get rid of, the virus without treatment. People who clear the virus become immune and cannot get infected with the Hepatitis B virus again.

Chronic Hepatitis B refers to a lifelong infection with the Hepatitis B virus. The likelihood that a person develops a chronic infection depends on the age at which someone becomes infected. Up to 90% of infants infected with the Hepatitis B virus will develop a chronic infection. In contrast, about 5% of adults will develop chronic Hepatitis B. Over time, chronic Hepatitis B can cause serious health problems, including liver damage, cirrhosis, liver cancer, and even death.

How is Hepatitis B spread?

The Hepatitis B virus is spread when blood, semen, or other body fluids from an infected person enters the body of someone who is not infected. The virus can be spread through:

- **Sex with an infected person.** Among adults, Hepatitis B is often spread through sexual contact.
- **Injection drug use.** Sharing needles, syringes, and any other equipment to inject drugs with someone infected with Hepatitis B can spread the virus.
- **Outbreaks.** While uncommon, poor infection control has resulted in outbreaks of Hepatitis B in healthcare settings.
- **Birth.** Hepatitis B can be passed from an infected mother to her baby at birth. Worldwide, most people with Hepatitis B were infected with the virus as an infant.

Hepatitis B is **not** spread through breastfeeding, sharing eating utensils, hugging, kissing, holding hands, coughing, or sneezing. Unlike some forms of hepatitis, Hepatitis B is also not spread by contaminated food or water.

What are the symptoms of Hepatitis B?

Many people with Hepatitis B do not have symptoms and do not know they are infected. If symptoms occur, they can include: fever, feeling tired, not wanting to eat, upset stomach, throwing up, dark urine, grey-colored stool, joint pain, and yellow skin and eyes.

When do symptoms occur?

If symptoms occur with an acute infection, they usually appear within 3 months of exposure and can last up to 6 months. If symptoms occur with chronic Hepatitis B, they can take years to develop and can be a sign of advanced liver disease.



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Continued on next page

How would you know if you have Hepatitis B?

The only way to know if you have Hepatitis B is to get tested. Blood tests can determine if a person has been infected and cleared the virus, is currently infected, or has never been infected.

Who should get tested for Hepatitis B and why?

CDC develops recommendations for testing based upon a variety of different factors. Here is a list of people who should get tested. The results will help determine the next best steps for vaccination or medical care.

All pregnant women are routinely tested for Hepatitis B. If a woman has Hepatitis B, timely vaccination can help prevent the spread of the virus to her baby.

Household and sexual contacts of people with Hepatitis B are at risk for getting Hepatitis B. Those who have never had Hepatitis B can benefit from vaccination.

People born in certain parts of the world that have increased rates of Hepatitis B. Testing helps identify those who are infected so that they can receive timely medical care.

People with certain medical conditions should be tested, and get vaccinated if needed. This includes people with HIV infection, people who receive chemotherapy and people on hemodialysis.

People who inject drugs are at increased risk for Hepatitis B but testing can tell if someone is infected or could benefit from vaccination to prevent getting infected with the virus.

Men who have sex with men have higher rates of Hepatitis B. Testing can identify unknown infections or let a person know that they can benefit from vaccination.

How is Hepatitis B treated?

For those with acute Hepatitis B, doctors usually recommend rest, adequate nutrition, fluids, and close medical monitoring. Some people may need to be hospitalized. People living with chronic Hepatitis B should be evaluated for liver problems and monitored on a regular basis. Treatments are available that can slow down or prevent the effects of liver disease.

Can Hepatitis B be prevented?

Yes. The best way to prevent Hepatitis B is by getting vaccinated. The Hepatitis B vaccine is typically given as a series of 3 shots over a period of 6 months. The entire series is needed for long-term protection.

Who should get vaccinated against Hepatitis B?

All infants are routinely vaccinated for Hepatitis B at birth, which has led to dramatic declines of new Hepatitis B cases in the US and many parts of the world. The vaccine is also recommended for people living with someone infected with Hepatitis B, travelers to certain countries, and healthcare and public safety workers exposed to blood. People with high-risk sexual behaviors, men who have sex with men, people who inject drugs, and people who have certain medical conditions, including diabetes, should talk to their doctor about getting vaccinated.

For more information

Talk to your doctor, call your health department, or visit www.cdc.gov/hepatitis.

PAR-Q+






The Physical Activity Readiness Questionnaire for Everyone

The health benefits of regular physical activity are clear; more people should engage in physical activity every day of the week. Participating in physical activity is very safe for MOST people. This questionnaire will tell you whether it is necessary for you to seek further advice from your doctor OR a qualified exercise professional before becoming more physically active.

GENERAL HEALTH QUESTIONS

Please read the 7 questions below carefully and answer each one honestly: check YES or NO.	YES	NO
1) Has your doctor ever said that you have a heart condition <input type="checkbox"/> OR high blood pressure <input type="checkbox"/> ?	<input type="checkbox"/>	<input type="checkbox"/>
2) Do you feel pain in your chest at rest, during your daily activities of living, OR when you do physical activity?	<input type="checkbox"/>	<input type="checkbox"/>
3) Do you lose balance because of dizziness OR have you lost consciousness in the last 12 months? Please answer NO if your dizziness was associated with over-breathing (including during vigorous exercise).	<input type="checkbox"/>	<input type="checkbox"/>
4) Have you ever been diagnosed with another chronic medical condition (other than heart disease or high blood pressure)? PLEASE LIST CONDITION(S) HERE: _____	<input type="checkbox"/>	<input type="checkbox"/>
5) Are you currently taking prescribed medications for a chronic medical condition? PLEASE LIST CONDITION(S) AND MEDICATIONS HERE: _____	<input type="checkbox"/>	<input type="checkbox"/>
6) Do you currently have (or have had within the past 12 months) a bone, joint, or soft tissue (muscle, ligament, or tendon) problem that could be made worse by becoming more physically active? Please answer NO if you had a problem in the past, but it does not limit your current ability to be physically active. PLEASE LIST CONDITION(S) HERE: _____	<input type="checkbox"/>	<input type="checkbox"/>
7) Has your doctor ever said that you should only do medically supervised physical activity?	<input type="checkbox"/>	<input type="checkbox"/>

If you answered NO to all of the questions above, you are cleared for physical activity. Please sign the PARTICIPANT DECLARATION. You do not need to complete Pages 2 and 3.

-  Start becoming much more physically active – start slowly and build up gradually.
-  Follow Global Physical Activity Guidelines for your age (<https://www.who.int/publications/i/item/9789240015128>).
-  You may take part in a health and fitness appraisal.
-  If you are over the age of 45 yr and NOT accustomed to regular vigorous to maximal effort exercise, consult a qualified exercise professional before engaging in this intensity of exercise.
-  If you have any further questions, contact a qualified exercise professional.

PARTICIPANT DECLARATION

If you are less than the legal age required for consent or require the assent of a care provider, your parent, guardian or care provider must also sign this form.

I, the undersigned, have read, understood to my full satisfaction and completed this questionnaire. I acknowledge that this physical activity clearance is valid for a maximum of 12 months from the date it is completed and becomes invalid if my condition changes. I also acknowledge that the community/fitness center may retain a copy of this form for its records. In these instances, it will maintain the confidentiality of the same, complying with applicable law.




NAME _____ DATE _____

SIGNATURE _____ WITNESS _____

SIGNATURE OF PARENT/GUARDIAN/CARE PROVIDER _____

 **If you answered YES to one or more of the questions above, COMPLETE PAGES 2 AND 3.**

 **Delay becoming more active if:**

-  You are currently experiencing a temporary illness, such as a cold or fever. It is best to wait until you feel better.
-  You are pregnant. In this case, talk with your health care practitioner, physician, qualified exercise professional, and/or complete the ePARmed-X+ at www.eparmedx.com before becoming more physically active.
-  Your health changes. Answer the questions on Pages 2 and 3 of this document and/or talk to your health care practitioner, physician, or qualified exercise professional before proceeding with any physical activity program.

PAR-Q+

FOLLOW-UP QUESTIONS ABOUT YOUR MEDICAL CONDITION(S)

1. Do you have Arthritis, Osteoporosis, or Back Problems?
 If the above condition(s) is/are present, answer questions 1a-1c If **NO** go to question 2

1a. Do you have difficulty controlling your condition with medications or other physician-prescribed therapies? (Answer **NO** if you are not currently taking medications or other treatments) YES NO

1b. Do you have joint problems causing pain, a recent fracture or fracture caused by osteoporosis or cancer, displaced vertebra (e.g., spondylolisthesis), and/or spondylolysis/pars defect (a crack in the bony ring on the back of the spinal column)? YES NO

1c. Have you had steroid injections or taken steroid tablets regularly for more than 3 months? YES NO

2. Do you currently have Cancer of any kind?
 If the above condition(s) is/are present, answer questions 2a-2b If **NO** go to question 3

2a. Does your cancer diagnosis include any of the following types: lung/bronchogenic, multiple myeloma (cancer of plasma cells), head, and/or neck? YES NO

2b. Are you currently receiving cancer therapy (such as chemotherapy or radiotherapy)? YES NO

3. Do you have a Heart or Cardiovascular Condition? This includes Coronary Artery Disease, Heart Failure, Diagnosed Abnormality of Heart Rhythm
 If the above condition(s) is/are present, answer questions 3a-3d If **NO** go to question 4

3a. Do you have difficulty controlling your condition with medications or other physician-prescribed therapies? (Answer **NO** if you are not currently taking medications or other treatments) YES NO

3b. Do you have an irregular heart beat that requires medical management? (e.g., atrial fibrillation, premature ventricular contraction) YES NO

3c. Do you have chronic heart failure? YES NO

3d. Do you have diagnosed coronary artery (cardiovascular) disease and have not participated in regular physical activity in the last 2 months? YES NO

4. Do you currently have High Blood Pressure?
 If the above condition(s) is/are present, answer questions 4a-4b If **NO** go to question 5

4a. Do you have difficulty controlling your condition with medications or other physician-prescribed therapies? (Answer **NO** if you are not currently taking medications or other treatments) YES NO

4b. Do you have a resting blood pressure equal to or greater than 160/90 mmHg with or without medication? (Answer **YES** if you do not know your resting blood pressure) YES NO

5. Do you have any Metabolic Conditions? This includes Type 1 Diabetes, Type 2 Diabetes, Pre-Diabetes
 If the above condition(s) is/are present, answer questions 5a-5e If **NO** go to question 6

5a. Do you often have difficulty controlling your blood sugar levels with foods, medications, or other physician-prescribed therapies? YES NO

5b. Do you often suffer from signs and symptoms of low blood sugar (hypoglycemia) following exercise and/or during activities of daily living? Signs of hypoglycemia may include shakiness, nervousness, unusual irritability, abnormal sweating, dizziness or light-headedness, mental confusion, difficulty speaking, weakness, or sleepiness. YES NO

5c. Do you have any signs or symptoms of diabetes complications such as heart or vascular disease and/or complications affecting your eyes, kidneys, **OR** the sensation in your toes and feet? YES NO

5d. Do you have other metabolic conditions (such as current pregnancy-related diabetes, chronic kidney disease, or liver problems)? YES NO

5e. Are you planning to engage in what for you is unusually high (or vigorous) intensity exercise in the near future? YES NO

PAR-Q+

6. Do you have any Mental Health Problems or Learning Difficulties? This includes Alzheimer's, Dementia, Depression, Anxiety Disorder, Eating Disorder, Psychotic Disorder, Intellectual Disability, Down Syndrome

If the above condition(s) is/are present, answer questions 6a-6b If **NO** go to question 7

6a. Do you have difficulty controlling your condition with medications or other physician-prescribed therapies? (Answer **NO** if you are not currently taking medications or other treatments) YES NO

6b. Do you have Down Syndrome **AND** back problems affecting nerves or muscles? YES NO

7. Do you have a Respiratory Disease? This includes Chronic Obstructive Pulmonary Disease, Asthma, Pulmonary High Blood Pressure

If the above condition(s) is/are present, answer questions 7a-7d If **NO** go to question 8

7a. Do you have difficulty controlling your condition with medications or other physician-prescribed therapies? (Answer **NO** if you are not currently taking medications or other treatments) YES NO

7b. Has your doctor ever said your blood oxygen level is low at rest or during exercise and/or that you require supplemental oxygen therapy? YES NO

7c. If asthmatic, do you currently have symptoms of chest tightness, wheezing, laboured breathing, consistent cough (more than 2 days/week), or have you used your rescue medication more than twice in the last week? YES NO

7d. Has your doctor ever said you have high blood pressure in the blood vessels of your lungs? YES NO

8. Do you have a Spinal Cord Injury? This includes Tetraplegia and Paraplegia

If the above condition(s) is/are present, answer questions 8a-8c If **NO** go to question 9

8a. Do you have difficulty controlling your condition with medications or other physician-prescribed therapies? (Answer **NO** if you are not currently taking medications or other treatments) YES NO

8b. Do you commonly exhibit low resting blood pressure significant enough to cause dizziness, light-headedness, and/or fainting? YES NO

8c. Has your physician indicated that you exhibit sudden bouts of high blood pressure (known as Autonomic Dysreflexia)? YES NO

9. Have you had a Stroke? This includes Transient Ischemic Attack (TIA) or Cerebrovascular Event

If the above condition(s) is/are present, answer questions 9a-9c If **NO** go to question 10

9a. Do you have difficulty controlling your condition with medications or other physician-prescribed therapies? (Answer **NO** if you are not currently taking medications or other treatments) YES NO

9b. Do you have any impairment in walking or mobility? YES NO

9c. Have you experienced a stroke or impairment in nerves or muscles in the past 6 months? YES NO

10. Do you have any other medical condition not listed above or do you have two or more medical conditions?

If you have other medical conditions, answer questions 10a-10c If **NO** read the Page 4 recommendations

10a. Have you experienced a blackout, fainted, or lost consciousness as a result of a head injury within the last 12 months **OR** have you had a diagnosed concussion within the last 12 months? YES NO

10b. Do you have a medical condition that is not listed (such as epilepsy, neurological conditions, kidney problems)? YES NO

10c. Do you currently live with two or more medical conditions? YES NO

PLEASE LIST YOUR MEDICAL CONDITION(S) AND ANY RELATED MEDICATIONS HERE: _____

GO to Page 4 for recommendations about your current medical condition(s) and sign the PARTICIPANT DECLARATION.

PAR-Q+

✔ If you answered NO to all of the FOLLOW-UP questions (pgs. 2-3) about your medical condition, you are ready to become more physically active - sign the PARTICIPANT DECLARATION below:

- ▶ It is advised that you consult a qualified exercise professional to help you develop a safe and effective physical activity plan to meet your health needs.
- ▶ You are encouraged to start slowly and build up gradually - 20 to 60 minutes of low to moderate intensity exercise, 3-5 days per week including aerobic and muscle strengthening exercises.
- ▶ As you progress, you should aim to accumulate 150 minutes or more of moderate intensity physical activity per week.
- ▶ If you are over the age of 45 yr and **NOT** accustomed to regular vigorous to maximal effort exercise, consult a qualified exercise professional before engaging in this intensity of exercise.

⚠ If you answered YES to one or more of the follow-up questions about your medical condition:

You should seek further information before becoming more physically active or engaging in a fitness appraisal. You should complete the specially designed online screening and exercise recommendations program - the **ePARmed-X+** at www.eparmedx.com and/or visit a qualified exercise professional to work through the ePARmed-X+ and for further information.

⚠ Delay becoming more active if:

- ✔ You are currently experiencing a temporary illness, such as a cold or fever. It is best to wait until you feel better.
- ✔ You are pregnant. In this case, talk to your health care practitioner, physician, qualified exercise professional, and/or complete the ePARmed-X+ at www.eparmedx.com before becoming more physically active.
- ✔ Your health changes. Talk to your health care practitioner, physician, or qualified exercise professional before continuing with any physical activity program.

- You are encouraged to photocopy the PAR-Q+. You must use the entire questionnaire and NO changes are permitted.
- The authors, the PAR-Q+ Collaboration, partner organizations, and their agents assume no liability for persons who undertake physical activity and/or make use of the PAR-Q+ or ePARmed-X+. If in doubt after completing the questionnaire, consult your doctor prior to physical activity.

PARTICIPANT DECLARATION

- All persons who have completed the PAR-Q+ please read and sign the declaration below.
- If you are less than the legal age required for consent or require the assent of a care provider, your parent, guardian or care provider must also sign this form.

I, the undersigned, have read, understood to my full satisfaction and completed this questionnaire. I acknowledge that this physical activity clearance is valid for a maximum of 12 months from the date it is completed and becomes invalid if my condition changes. I also acknowledge that the community/fitness center may retain a copy of this form for records. In these instances, it will maintain the confidentiality of the same, complying with applicable law.

NAME _____ DATE _____

SIGNATURE _____ WITNESS _____

SIGNATURE OF PARENT/GUARDIAN/CARE PROVIDER _____

For more information, please contact

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Key References

1. Jamnik VK, Warburton DER, Makarski J, McKenzie DC, Shephard RJ, Stone J, and Gledhill N. Enhancing the effectiveness of clearance for physical activity participation; background and overall process. APNM 36(S1):S3-S13, 2011.
2. Warburton DER, Gledhill N, Jamnik VK, Bredin SSD, McKenzie DC, Stone J, Charlesworth S, and Shephard RJ. Evidence-based risk assessment and recommendations for physical activity clearance; Consensus Document. APNM 36(S1):S266-S298, 2011.
3. Chisholm DM, Collis ML, Kulak LL, Davenport W, and Gruber N. Physical activity readiness. British Columbia Medical Journal. 1975;17:375-378.
4. Thomas S, Reading J, and Shephard RJ. Revision of the Physical Activity Readiness Questionnaire (PAR-Q). Canadian Journal of Sport Science 1992;174:338-345.

The PAR-Q+ was created using the evidence-based AGREE process (1) by the PAR-Q+ Collaboration chaired by Dr. Darren E. R. Warburton with Dr. Norman Gledhill, Dr. Veronica Jamnik, and Dr. Donald C. McKenzie (2). Production of this document has been made possible through financial contributions from the Public Health Agency of Canada and the BC Ministry of Health Services. The views expressed herein do not necessarily represent the views of the Public Health Agency of Canada or the BC Ministry of Health Services.

MSAT Capstone Project Guidelines

Formatting

- AMA style
- Running header with page numbers
- 1” margins, double-spaced and a 12-point font
- Minimum of 22 pages (of content) with the final page requirement guided by the project advisor

Title Page

Abstract

- 250 words maximum
- Follow NATA Free Communications guidelines for abstract formatting

Chapter 1: Introduction (suggested 2-3 pages)

- Introduce the topic in an engaging manner
- Provide a brief overview of the broader topic area to orient the reader
- Clearly state the specific focus of the study and pose the research question(s) or hypothesis(es) that the study aims to address
- Explain why the research is important
- Discuss the potential contributions of the study to the field, including any practical applications or implications
- Provide a concise review of relevant previous peer reviewed research and theories related to the topic - highlight key findings, controversies, and gaps in the existing literature that the current study aims to address
- Clearly state the specific hypotheses or the objectives of the study
- Explain why this particular study is being conducted
- Provide a brief overview of the research methodology or approach that will be used to address the research question(s)
- Clearly define the boundaries of the study (constraints such as time, resources, or specific population samples, that may impact the results or generalizability).
- Provide a brief preview of the structure of the paper - mention what will be covered in subsequent sections (e.g., methodology, results, discussion)

Chapter 2: Literature Review

Experimental Research

- Formatted in AMA style
 - Minimum of 12 pages
 - Minimum of 15 peer reviewed journal articles published within the past 12 years (other sources may be used but will not count toward this number)
 - 2 of the 12 sources may be older than 12 years with instructor/chair permission (based on relevance to topic)
- Clearly and deeply represents the existing body of literature on the topic and supports the purpose of the project

Non-experimental Research

- Formatted in AMA style
 - Minimum of 18 pages
 - Minimum of 25 peer reviewed journal articles published within the past 12 years (other sources may be used but will not count toward this number)
 - 5 of the 25 sources may be older than 12 years with instructor/chair permission (based on relevance to topic)

Chapter 3: Methods (suggested 2-3 pages) Only if experimental research

- Describe the overall research design (e.g., experimental, observational, survey, etc.) and explain the rationale behind choosing this particular design
- Specify the characteristics of the participants (e.g., age range, gender, any specific inclusion or exclusion criteria)
- Discuss how participants were recruited or selected
- Explain and justify the sampling technique used
- Identify and define the independent and dependent variables
- Describe any control variables or covariates
- Lists and describe any specialized equipment, instruments, materials, or software used in the study - provide details about the source or manufacturer of these materials
- Step-by-step account of how the research was conducted, including any pre-testing, training, or familiarization of participants
- Discuss the sequence of events and any tasks or interventions performed
- Explain how data was collected (e.g., through observations, surveys, experiments, etc.).
- Describe and justify the statistical or analytical methods used to process and analyze the collected data

- Discuss any ethical approvals or permissions obtained for the research
- Address how informed consent was obtained from participants, and any steps taken to ensure confidentiality and anonymity
- Detail the specific statistical tests or techniques used for data analysis and provide rationales for choosing these particular method
- Discuss measures taken to ensure the validity and reliability of the research findings
- Provide enough detail so that other researchers can replicate the study if desired

Chapter 4: Results (suggested 3-4 pages) only for experimental research

Experimental Research

- Provide a brief recap of the research question or hypothesis and any pertinent background information
- Tables: give a title, and each column and row should be labeled appropriately
- Figures or Graphs: bar graphs, line graphs, scatter plots, etc. should have a caption explaining the content
- Explain and interpret key findings (discussing trends, patterns, significant differences, and any relationships observed in the data, etc.).
- Details of statistical tests or analyses performed (includes the specific tests used, the values obtained (e.g., p-values), and any statistical software or tools utilized).
- Acknowledge any limitations in the study that may affect the interpretation of the results
- If the study involves different groups (e.g., experimental vs. control, different demographic groups), the results for each subgroup should be presented
- Any additional analyses or exploratory data investigations that were conducted, even if they were not originally planned, should be mentioned
- Compare results with those from other studies in the field
- Results section should present the data objectively and without interpretation or speculation.
- Focus should be on presenting the data accurately and transparently.

Chapter 5: Discussion

Experimental Research

- 2-3 pages

Non-Experimental Research

- 4-5 pages
- Summarize the main findings of the study
- Discuss how your results compare or contrast with previous studies or existing literature
- Highlight similarities and differences and explain any discrepancies

- Analyze any patterns, trends, or relationships observed in the data with a detailed explanation of these phenomena
- Acknowledge the limitations of your study
- Consider and address potential alternative explanations for your findings; discuss why you believe your interpretation is the most valid
- Discuss the broader implications of your findings: How does your research contribute to the field? What practical applications or theoretical advancements might result from your work?
- Suggest directions for future research based on the limitations or unanswered questions arising from your study (provide specific ideas or hypotheses for further investigation).
- Summarize the key points discussed in the conclusion section. Restate the main contributions and implications of your research.
- Relate your findings back to the broader body of literature in your field
- Explain how your work fits into the existing knowledge and advances the field
- Do not introduce new data or results
- Focus on providing a balanced and evidence-based interpretation of the results
- Avoid overgeneralizations or unsupported claims

Chapter 6: Personal Reflection (2-3 pages)

- What new skills/abilities/competency did you acquire?
- How well prepared were you?
- What was most challenging and what was most rewarding?
- State whether the goals and objectives of the project were realized. If some were not, explain why.
- Explain any challenges you faced while working on the project and how you were able to or failed to navigate those challenges.

State whether or not you followed the steps outlined in the methods section. Which steps were more critical to realization of the project and which steps were less critical. Describe your interactions with agency staff, clients and how the agency responded to your progress or lack of progress during the completion of the project.